

North Dakota Trauma Registry Data Dictionary

**North Dakota Department of Health
Division of Emergency Medical
Services**



August 2008 Revision

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INTRODUCTION

Traumatic injury is the leading cause of death in Americans 44 years of age and younger. It results in the loss of more productive work years than both cancer and heart disease combined. The loss of productivity and health care costs associated with traumatic injuries accounts for 100 billion dollars annually.

A trauma registry is a disease-specific data collection of uniform data elements that describe an injury event, demographics, prehospital information, diagnosis, care, outcomes, and costs of treatment for injured patients. The trauma registry is used for improving trauma patient care, evaluating the adequacy of the system, and assessing compliance of various regions within the state trauma system.

Hospital-based trauma registries are the key source for providing much of the research and quality assessment work that has provided clinicians and policy makers the necessary information on methods to optimize the care for the injured patients. The North Dakota Data Dictionary was revised using the National Data Dictionary published by the National Trauma Registry of the American College of Surgeons, with modifications made specific to the North Dakota Trauma Registry. This document is intended to serve as a guide for trauma program managers and trauma registrars completing the required information. It provides a brief summary and definition of every data point that is used within the North Dakota Trauma Registry.

HIPAA Statement

The federal law known as “HIPAA” stands for the Health Insurance Portability and Accountability Act of 1996. This law was passed to promote more standardization and efficiency in the health care industry. HIPAA directly impacts health care providers who transmit any health care information in electronic form in connection with a covered transaction, as well as indirectly impacting their business partners.

There are four parts to HIPAA’s Administrative Simplification:

1. Electronic transactions and code sets standards requirements

National standards (for formats and data content) are the foundation of this requirement.

HIPAA requires every provider who does business electronically to use the same health care transactions, code sets and identifiers. Transactions and code sets standards requirements were created to give the health care industry a common language to make it easier to transmit information electronically.

2. Privacy requirements

The privacy requirements limit the release of patient protected health information without the patient’s knowledge and consent beyond that required for patient care. Patient’s personal information must be more securely guarded and more carefully handled when conducting the business of health care.

3. Security requirements

The security regulation outlines the minimum administrative, technical and physical safeguards required to prevent unauthorized access to protected health care information. The general requirements of the security rule include:

- Ensuring confidentiality, integrity and availability of electronic protected health information that a covered entity creates, receives, maintains or transmits;
- Protecting against reasonably anticipated threats or hazards to the security or integrity of information;
- Protecting against reasonably anticipated uses and disclosures not permitted by privacy rules;
- ensuring compliance by the workforce.

4. National identifier requirements

HIPAA requires health care providers, health plans and employers to have standard national numbers that identify them on standard transactions.

The HIPAA law applies directly to three specific groups referred to as “covered entities”. The three groups include Health Care Providers who transmit any health information in electronic form in connection with a transaction for which standards requirements have been adopted; Health Plans; and Health Care Clearinghouses.

The NDDoH has been designated as a hybrid entity. A hybrid entity is a single legal covered entity whose business activities include both covered and noncovered functions. The NDDoH’s covered functions are performed by the Division of Microbiology, however, the Department has chosen to operate under “best practices” as a single covered entity, and all divisions and programs of the Department operate under the privacy rule.

PREFACE

1. All times are to be registered in military time.
When entering times, you will be using the 24-hour clock. You do not need to enter a delimiter in between the hours and minutes. If you do not have minutes, you can simply enter the hour.

For Example: 1313 will be converted to 13:13
13 will be converted to 13:00

2. You may enter the date without dashes or slashes.

For example: 101090 will be converted to 10/10/90
9/9/90 will be converted to 09/09/90
9/9 will be converted to 09/09/90 (it will use the current year)

3. All temperatures are to be charted in Centigrade. See Appendix G for conversion chart or use the formula $C = (F - 32) \times 5/9$ (see example below) or a conversion calculator for Fahrenheit to Celsius can be found at www.metric-conversions.org or Appendix G.

For example: $98.6 - 32 = 66.6 \times 5/9 = 37$

4. All weights are to be charted in Kilograms. Pounds can be converted to kilograms by dividing the pounds by 2.2. A pound to kilogram conversion calculator can be found at www.metric-conversions.org or Appendix H.

For example 200 lbs. divided by 2.2 = 90.9 Kilograms

5. If the patient is brought to a facility **WITHOUT** being evaluated or treated at another facility, select patient arrived from the scene, regardless of the delay between time of injury and time of presentation to the hospital.
6. Vague descriptions like “blunt trauma” or “closed head injury” are not specific diagnoses and cannot be coded. **PAIN** of any kind is a symptom and can’t be coded.
7. When coding, if there is any question about the severity of an injury, code conservatively (i.e. least severe code in that injury category). You should not code injuries that are possible, probable, impression of, or rule out.
8. Loss of Consciousness - must be disregarded unless witnessed by EMS or medical personnel.
9. Penetrating Injuries – if deeper structures are injured, code the injury under the appropriate organ or vessel. (i.e. liver laceration). Always code the deepest structure injured. **DO NOT** code the overlying skin injury, as entry and exit wounds are in the score of the deepest structure.

10. Always use the highest level of reliability when abstracting data and resolving contradictory information.

- a. Highest to lowest reliability
 - i. Medical examiner report
 - ii. Hospital/medical records
 - Autopsy report
 - Operative report
 - Radiology reports
 - Nursing or ICU notes
 - Physician progress notes
 - ED record
 - Discharge summary
 - Face sheet
 - iii. Field Records
 - Ambulance patient care report
 - Police report
 - iv. Bystander
 - v. Patient

Null Values

- 11. Unknown means the information is appropriate to this patient, but is not known or reasonably obtainable.
- 12. Not is used for fields when the desired data is a laboratory test result, but the test was not ordered.
- 13. NA (Not Applicable) means the information for a field does not apply to this patient (i.e. pediatric trauma scores on adults) or the information does not make sense for this field.

Definitions

- 14. **Pediatric** - refers to patients 14 years old or younger. (referenced from *Resources for Optimal Care of the Injured Patient 2006*).
- 15. **Readmission** – admission to the hospital within 72 hours of previous hospital discharge because of missed diagnosis or complications from original injuries (not late effects of). (i.e. infected wound, subacute or chronic subdural)
- 16. **Foreign Body** - patients with diagnoses of foreign bodies (ICD9 930-939) are required to be included in the registry only if there is a resulting injury. In these cases, the resulting injury should be coded.

17. **Transfers** – patients sent from one acute care hospital to another acute care hospital. If patients are sent by private vehicle (non-ambulance) they are **NOT** considered transfers for the purpose of inclusion, but may meet other inclusion criteria.
18. **Farm Related Injury** – a non-household injury incurred on the farm (ICD9-849.1) by any farmer, farm worker, farm family member, or other individual; or any non-farm injury incurred by a farmer, farm worker, or farm family member in the course of handling, producing, processing, or warehousing farm commodities.
- Indicates injury meets the farm-related injury definition. Injury may not necessarily be work-related or directly related to the farm.
 - **Farm Related Includes:**
 - Tractor roll-over
 - Caught in power take-off
 - Unloading grain wagon
 - Getting caught in a barbed wire fence on the farm
 - Injury occurring from repair or maintenance of farm related equipment on farm or in field
 - Falling or slipping on farm (not including in house or immediate yard surrounding house)
 - Being bitten by, struck by, or fallen on by an animal on the farm. (does not including leisure riding of horses)
 - **Farm Related Excludes:**
 - Injuries incurred by farmers or non-farmers who are on farms for wide variety of purposes (i.e. visiting, hunting, swimming, or other recreation activities)
 - Farmhouse or immediate yard surrounding house
 - Fall from play or home maintenance/repair (i.e. hanging Christmas lights, painting, cleaning gutters, etc.)
19. **Work Related** – indicates if a patient was at work or working when *trauma event* occurred. *Trauma event* is defined as the injury-producing event or illness-producing exposure (i.e. chemicals) that precipitated the patient's traumatic injury.
- a. Yes - the patient was working when trauma occurred
 - b. No - the patient was not working when trauma event occurred
 - c. NA - child, unemployed, retiree
 - d. Unk - either inadequate or no documentation

Work related comprises manual or professional work for salary, bonus, other types of income or duties for which one would not normally gain an income. Use your best judgment in determining whether the patient was working or not.

This data element may be used to gather information about the incidence of work-related injuries and may be useful in the planning and development of work place injury prevention.

- **Work Related Includes:**

- Apprentice or vocational activities
- Breaks on employer premises (in hallway, rest room, cafeteria, storage area)
- Traveling on business, including to/from customer/business contacts
- Work for pay or compensation at home
- Working in family business, including family farm (activity should clearly be related to profit-oriented business)
- Working on, arriving at, or leaving employer parking lot
- Volunteer work and domestic duties such as caring for children and relatives, cleaning, cooking, gardening, and household maintenance

Work Related Excludes:

- Commuting to or from work site
- Engaged in recreational activities on employer controlled facilities
- Homemaker working at homemaking activities
- Illicit work (drug trafficking)
- Learning activities (attending school or lesson, undergoing education)
- Operating vehicle (personal or commercial) for non-work purposes
- Student engaged in school activities
- Visiting for non-work purposes, not on official business
- Working of self-non profit (lawn mowing, repair roof, hobby or recreation)

20. Glasgow Coma Scale

GCS is always documented based on assessment of the best side with the best response. GCS scores range from 3 (the lowest/poorest score possible) to 15 (highest/best score possible). The GCS has infant/pediatric adaptations.

Assessment qualifiers that potentially affect the assessment outcome such as intubation, sedation, paralytics and combinations of these factors are addressed in the field name PARALYTICS.

21. Leave No Blank Fields

Please DO NOT leave fields blank! If fields are left blank they cause errors in data reporting. Fill all fields in with the most appropriate response. See Null Values definitions.

**North Dakota Trauma
Inclusion/Exclusion Criteria
Patients to be downloaded to the State**

INCLUDED:

- ❖ All Trauma Codes/Alerts or any level of trauma team activation (regardless of ICD9)
- ❖ International Classification of Diseases, Ninth Revision (ICD9) codes of 800-959.9 and 991.0-3 (frostbite) and one or more of the following:
 - Deaths that are registered to the hospital
 - Inter-facility transfers by ambulance that are admitted to the receiving hospital
 - Transfers out by ambulance
 - Patients admitted for > 48 hours
 - Patients admitted from ED to ICU

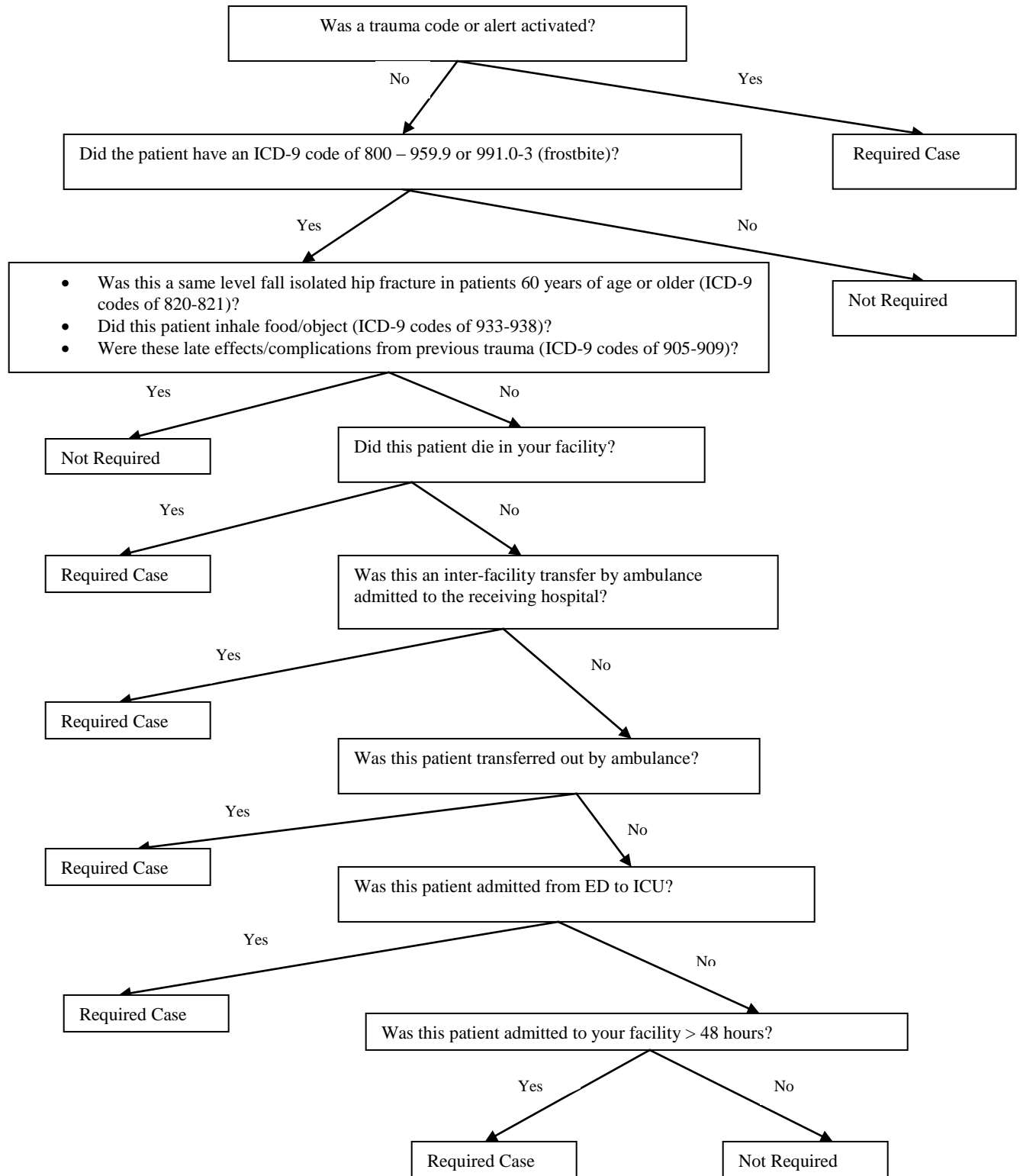
EXCLUDED:

Same level falls with isolated hip fractures in patients 60 years of age or older (ICD9 codes of 820 -821)
Inhalation of food/object (ICD9 codes of 933-938)
Late effects/complications (ICD9 codes of 905-909)

These are excluded from the trauma registry, unless they are a trauma code/alert or they have an additional injury code.

Poisoning (ICD9 codes of 960-989.9)
Hanging (ICD9 codes of 994.7)
Adult and child maltreatment (ICD9 codes of 995.5-995.8)
Drowning (ICD9 codes of 994.1)

ND STATE TRAUMA REGISTRY INCLUSION CRITERIA (Revised 2007)



DEMOGRAPHICS

Age

Field Name: AGE_NUMBER

Description: This is the patient's age; if under 3 weeks old this is the number of days, if under 3 months old this is the number of weeks, if under 3 years old this is the number of months, or if older this is the number of years. This is a defaulted field. This default has been created from data you have previously entered. If, on the data entry screen, you push the ENTER key, the computer will automatically fill in the default for you. If you do not want to accept the default, you may enter the correct information.

Age Units

Field Name: AGE_UNITS

Description: This is the patient's age; if under 3 weeks old this is the number of days, if under 3 months old this is the number of weeks, if under 3 years old this is the number of months, or if older this is the number of years. This is a defaulted field. This default has been created from data you have previously entered. If, on the data entry screen, you push the ENTER key, the computer will automatically fill in the default for you. If you do not want to accept the default, you may enter the correct information.

Alternate Residence

Field Name: HOME

Description: This is used for patients without a home zip code.

HOME Homeless (lack of a residential address, includes shelters, missions and vehicles)
UND Undocumented citizen
MI Migrant (temporary or seasonal worker with no local residential address)
FV Foreign visitor (includes Canadian visitors)

Date of Birth

Field Name: DOB

Description: This is the patient's date of birth. If DOB is available, the Age_Number and Age_Unit fields will default.

City of Residence

Field Name: RES_CITY

Description: This is the patient's city of residence, not the location of the incident.

County of Residence

Field Name: RES_COUNTY_STATE

Description: This is the patient's county of residence, not the county of the incidence.

Country of Residence

Field Name: RES_COUNTRY_STATE

Description: This is the patient's country of residence, not the country of the incident.

Institution Number

Field Name: INSTITUTE_NO

Description: This is the institution number for the hospital - a hospital-specific identification number.

Through the INSTITUTE file, a hospital may use several Institute Numbers for different purposes: multi-hospital data collection, inpatient vs. outpatient data, etc. Each of these numbers can point to the same State Report Code, so that data aggregation or downloading is accurate.

The Institute Number is the second part of the two part key (Trauma Number is the first) that individualizes each patient record.

Race

Field Name: RACE

Description: This is the patient's race. Refer to the RACE file.

A	Asian
B	Black or African American
I	American Indian
O	Any other including mixed race
UNK	Unknown
W	White
PI	Pacific Islander or Native Hawaiian

Ethnicity

Field Name: ETHNICITY

Description: This is the patient's ethnicity referring to Hispanic.

H	Hispanic
N	Non-Hispanic

Sex

Field Name: SEX

Description: This is the patient's sex: 'M' for male, 'F' for female, or 'O' for other.

M	Male
F	Female
O	Other

This is standard demographic information used in epidemiologic analysis. This can be useful in targeting injury prevention efforts.

State of Residence

Field Name: RES_STATE

Description: This is the patient's state of residence, not the location of the incident.

Tracking Number

Field Name: TRACKING_NO

Description: This is the patient's Tracking Number - a sequential number that uniquely identifies the case.

Note: The < F2 > key will give you assistance in finding the case, if the Tracking Number is unknown.

This is a required number. It is part of the two-part key that individualizes each patient record, yet helps to maintain the confidentiality of each record.

Zip Code of Residence

Field Name: ZIP_CODE

Description: This is the patient's zip code. It can be entered as 5 or 9 digits. If you are entering a 9-digit code, no dashes need to be entered.

Example: 80104-1022 would be entered as 801041022

NA (not a U.S. resident, includes Canadian)

NOTES: _____

EVENT

E-Code, Geographic Place of Occurrence

Field Name: LOCATION

Description: This is the ICD9 'E' geographic location code. Refer to LOCATIONS file. Enter in the Location Code of the injury. These entries are the E849 location codes.

Place of occurrence is used to denote the place the injury occurred.

E849.0 HOME

Private: Garage	
Apartment	Garden
Boarding house	Home
Farm house	Walk
Home premises	Yard of home
House (residential)	Driveway
Non-institutional place of residence	
Swimming pool in private house or garden	

Excludes: home under construction and not yet occupied or an institutional place of residence.

E849.1 FARM

Farm: buildings, land under cultivation

Excludes farm house and home premises of farm

E849.2 MINE & QUARRY

Gravel pit	Tunnel under construction
Sand pit	

E849.3 INDUSTRIAL PLACE AND PREMISES

Building under construction	Loading platform of factory or store
Dockyard	Plant industrial
Dry Dock	Railway yard
Factory buildings and premises	Shop (place of work)
Garage (place of work)	Warehouse
Industrial yard	Workhouse

E849.4 PLACE OF RECREATION AND SPORT

Amusement park	Public park
Baseball field	Racecourse
Basketball court	Resort NOS
Beach resort	Riding school
Cricket ground	Rifle range
Fives court	Seashore resort
Football field	Skating rink
Golf course	Sports Palace
Gymnasium	Stadium
Hockey rink	Swimming pool (public)
Holiday camp	Tennis court
Ice palace	Vacation resort
Lake resort	
Mountain resort	
Playground including school playground (<u>excludes</u> that in private house or garden)	

E849.5 STREET AND HIGHWAY

Maintained public roadways and their right of ways

E849.6 PUBLIC BUILDING

Building (includes adjacent grounds) used by the general public or by a particular group of the public, such as:

Airport	Nightclub
Bank	Office
Café	Office building
Casino	Opera house
Church	Post office
Cinema	Public hall
Clubhouse	Radio broadcasting station
Courthouse	Restaurant
Dance hall	School (state, public or private)
Garage building (for car storage)	Shop (commercial)
Hotel	Station (bus or railway)
Market (grocery or other commodity)	Store
Movie house	Theater
Music hall	

Excludes home garage, industrial building or workplace

E849.7 RESIDENTIAL INSTITUTION

Children's home	Old people's home
Dormitory	Orphanage
Hospital	Prison
Jail	Reform school

E849.8 OTHER SPECIFIED PLACES

Beach (NOS)	Pond or pool (natural)
Canal	Prairie (grassland, pasture)
Caravan site (NOS)	Public place (NOS)
Derelict house	Railway line
Desert	Reservoir
Dock	River
Forest	Sea
Harbor	Seashore (NOS)
Hill	Stream
Lake (NOS)	Swamp
Mountain	Trailer court
Parking lot	Woods
Parking place	

E849.9 UNSPECIFIED PLACE

If location is not specifically listed above, then use unspecified place.

This information is useful in determining locations where injuries are occurring targeting injury prevention.

NOTES: _____

External Cause of Injury

Field Name: CAUSE_E_CODES

Description: These are the ICD9 E codes for cause. 'E' is not required. This describes the event or circumstance, which is responsible for the primary injury. The computer will assist you in determining the codes if you need assistance. The first E Code selected should be associated with the primary cause of injury. These codes should be utilized when presenting or publishing any data on injury causes.

NOTE: The < F2 > key will activate the code assistance feature. The validity of the E Code is checked against the ECODES file on the ICD9 menu, the ICD-9-CM book, or call for assistance (see page 1)

This data element permits classification of environmental events, circumstances, and the conditions as the cause of injury and other adverse effects.

Cause Code

Field Name: CAUSE_CODE

Description: This is an optional field. It is not a state download field.

This is the code for the cause or mechanism of injury. Some codes may prompt you to answer specific questions about this cause of injury. This field uses the CAUSE File. Each entry in the CAUSE file is related to appropriate E Codes. If you add a new CAUSE code, be sure to specify the E Code groups. Since only one value can be entered, select the cause code that is most relevant to patient injury. For example, if a person was attacked by a dog and sustained moderate bites, and then fell 20 feet resulting in a severe head injury, then select the code that caused the most significant trauma; in this case the fall.

NOTE: Do not use this field for reporting purposes – use cause ECODES – as this field is not all inclusive.

AIR (i.e. airplane, hang-gliders, helicopters, ultra lights, hot air balloons, and skydivers)

ANIMAL (i.e. struck by animal, animal bites, injured by animal, stepped/crushed/mauled by animal)

ASSAULT (physical blunt attack)

ATV (definition of 3,4,5,6,7,8 “wheelers”)

BIKE (bicycle, tricycle)

BIOHAZ (intentional or non-intentional exposure to potentially hazardous materials, i.e. a mass casualty incident)

BURN (thermal, chemical, and electrical)

FALL (falls)

GSW (gunshot wounds)

MACH (machinery incidents)

MC (motorcycle)

MV (motor vehicle auto and truck, i.e. cars, pickup truck, SUV, van, bus, semi, etc.)

OTHER (any other)

OV (i.e. animals being ridden, horse buggy, golf cart, go-cart, etc.)

PED (pedestrian)

SKATE (i.e. ice skates, roller skates, roller blades, and skateboard)

SKI (snow ski, snowboard)

SNOWMOBILE

SPORT (organized football, soccer etc)

STAB (point force or piercing injuries, i.e. knife, nail, tine.)

WATER (water transport and activities)

Country of Injury

Field Name: INJURY_COUNTRY

Description: The country where the patient was found or to which the unit responded, or best approximation.

County and State of Injury

Field Name: COUNTY_STATE

Description: This is the county where the injury occurred. (Use 'out of state' code if injury occurred outside of North Dakota. If injury county is not known use 'UNK')

This provides useful data to assist with public health interventions, identify populations at risk, focus injury prevention programs, and assess transport issues.

State of Injury

Field Name: INJURY_ST

Description: This is the state code where the injury occurred. (If injury State is not known use 'UNK')

This provides useful data to assist with public health interventions, identify populations at risk, focus injury prevention programs, and assess transport issues.

Nearest Town to Injury

Field Name: NEAREST_TOWN

Description: This is the town nearest to where the injury occurred

Injury Date

Field Name: INJURY_DATE

Description: This is the date the injury occurred. UNK is an acceptable value.

The date may be entered without dashes or slashes.

Injury Time

Field Name: INJURY_TIME

Description: This is the time of injury. It is entered using the 24-hour clock. "UNK" should be used if an accurate time is not known.

When entering in times, you will be using the 24-hour clock. You do not need to enter delimiters between the hours and minutes. If you do not have minutes, you can simply enter the hour.

Injury Location Zip Code

Field Name: INJURY_ZIP

Description: This is the Zip Code of the location where the injury occurred. It can be entered as 5 or 9 digits. If you are entering a 9-digit code, no dashes should be entered.

Example: 801231212 would be converted to 80123-1212

Protective Devices

Field Name: PROTECTIVE_DEVICES

Description: Enter in the codes for the protective devices used by the patient at the time of the injury.

Patterns

AIR	airbag present
CHILD	child restraint
EYE	goggles, shields, and safety glasses
GEAR	protective nonclothing gear (i.e. shin guards)
HEL	helmet (i.e. bikes, sports, riding horse, hardhat)
NA	not applicable
NONE	none
OTHER	other
PAD	protective padding or clothing (i.e. shoes, gloves)
PFD	personal flotation device
SB	seatbelt
UNK	unknown

Child-Specific Restraint

Field Name: CHILD_RESTRAINT

Description: Protective child restraint devices used by the patient at the time of injury.

Infant Child Seat (rear facing)
Child Car Seat (forward facing)
Child Booster Seat
UNK (child restraint used; unknown type)

Airbag Deployment

Field Name: AIRBAG

Description: Indication of an airbag deployment during a motor vehicle crash.

No Airbag Deployment	Airbag Deployed Side
Airbag Deployed Front	Airbag Deployed Other (Knee, Airbelt, Curtain)
Airbag Deployed Unspecified Type	

Risk Factors – Comorbidity

Field Name: RISK_TYPE

Description: These are the risk factor codes. Risk factors must be documented in medical record. See appendix M for definitions.

Patterns			
ANGINA	within the past 30 days	SMOKER	currently smoking
ASCITES	within the past 30 days	STERIODS	on steroids
CHEMO	within the past 30 days	SUB	abuse of legal or illegal substance
CHF	congestive heart failure	UNK	unknown
COAG	bleeding disorder	VARICES	esophageal varices
COPD	severe COPD		
CVA	CVA with neurological deficit		
DIALYSIS	currently on or receiving		
DM	diabetes mellitus		
DNR	Do Not Resuscitate, No CPR		
ETOH	Alcoholism **		
HEALTH	Functional health status		
HTN	hypertension and on medication		
IMPAIRED	impaired sensorium		
METS	disseminated cancer		
MI	within the past 6 months		
NONE	no known comorbid conditions		
OBESE	if stated in medical record		
PREG	pregnancy		
PVD	revascularization or amputation related to peripheral vascular disease		

****Note:** See appendix L for definition.

Triage Codes

Field Name: TRIAGE_CODES

Description: These are the triage codes.

AMPUT	amputation proximal to wrist and ankle
CHEST	flail chest
DEFORM	major auto deformity > 20 inches (documented or photographed by EMS)
EJECT	ejection from automobile
FALL	fall > 20 feet
FATAL	death in same passenger compartment
FX	>= 2 proximal/shaft long-bone fractures (includes: humerus and femur)
GCS	glasgow < 14
HYPO	systolic bloodpressure < 90
IMPACT	auto-ped or auto-bike > 5 mph impact
INTRUS	intrusion in passenger compartment > 12 inches (documented or photographed by EMS)
LIMB	paralysis
MCYCLE	motorcycle crash > 20 mph or separation of bike rider
NONE	none
OTHER	other triage code not listed (i.e. snowmobile/ATV rider separation, etc.)
PEDES	pedestrian thrown or run over
PELVFX	pelvic fractures
PEN	penetrating injury head, neck, torso, extremities proximal to elbow and knee
RESP	respiratory rate < 10, >29
ROLL	rollover
SKULL	open or depressed skull fracture
SPEED	initial speed > 40 mph
TRAP	extrication > 20 minutes
BURN	thermal, chemical, electrical

Type of Trauma

Field Name: TRAUMA_TYPE

Description: This is the trauma type and the predominant injury type.

BURN	burns
B	blunt injury: diffuse force, as in most MVC's
P	penetrating injury: <u>point force</u>
	Examples:
	Bullet/shell/BB
	Fork tine
	Knife
	Impaled object (i.e. nail)

NOTE: If any of these causes a laceration/amputation type injury, then the trauma type would change to blunt. Example: Saw blade penetrating the skin, but creating a laceration or an amputation.

This is used to determine percentages of each type of trauma.

Work Related Accident

Field Name: INDUST_ACC

Description: This is whether the accident is work related or not.

N	not work related
Y	work related
UNK	unknown

[illegible]

Occupation

Field Name: OCCUPATION

Description: This is the patient's occupation.

ARC	architecture and engineering occupations
BUS	business and financial operations occupations
COM	community and social service occupations
COMP	computer and mathematical occupations
CONS	construction and extrication occupations
DISABLED	disabled
ED	education, training and library occupations
ENT	art, design, entertainment, sports and media occupations
FARM	farming, fishing and forestry occupations
FOOD	food preparation and serving related occupations
HEALTH	health care practitioners and technical occupations **
HS	health care support occupations **
LEGAL	legal occupations
MAIN	building and grounds cleaning and maintenance occupations
MAN	management occupations
MILITARY	military-specific occupations
NA	not applicable (i.e. child through grade 12)
OFFICE	office and administrative support occupations
PER	personal care and service occupations
PRO	protective service occupations (i.e. police, fire etc.)
PROD	production occupations
REP	installation, maintenance and repair occupations
RETIRED	retired
SALE	sales and related occupations
SCI	life, physical and social science occupations
STUDENT	student, full time college
TRANS	transportation and material moving occupations
UNEMP	unemployed
UNK	unknown

****Note:** See appendix K for definition.

Type of Industry

Field Name: INDUSTRY_TYPE

Description: The industry type is useful for the study of work related injuries. This is the industry classification associated with the patient's work environment/employment.

AG	agriculture, forestry and fishing	OTHER	other services
CONS	construction	PROF	professional and business services
EDU	education and health services	RETAIL	retail trade
FINANCE	finance, insurance and real estate)	TRANS	transportation and public utilities
GOV	government	UNK	unknown industry for work related injury
INF	information service	WHOLE	wholesale trade
LEISURE	leisure and hospitality		
MAN	manufacturing		
NA	unemployed, child, not applicable or not work related		

REFERRING

Hospital Transfer

Field Name: HOSPITAL_TRANSFER

Description: This is whether the patient was transferred from another acute care hospital (excluding swing or long term care beds). This field is required for all patients.

Y Yes, this was a hospital transfer
N No, this was not a hospital transfer
UNK Unknown

Referring Intubated

Field Name: INTUBATED

Description: This is whether the patient was intubated when the GCS was done (i.e. endotracheal tube, trach, cricothyroidotomy, laryngeal mask airway (LMA), and combitube.

Was the patient intubated at the time this set of vital signs was taken?

Y (Yes) (state report code = Y)
N (No) (state report code = N)

Referring Arrival Date

Field Name: REFERRING_ARRIVAL_DATE

Description: This is the date the patient arrived at the referring hospital.

Referring Arrival Time

Field Name: REFERRING_ARRIVAL_TIME

Description: This is the time the patient arrived at the referring hospital. The 24-hour clock must be used.

Referring Discharge Date

Field Name: REFERRING_DISCHARGE_DATE

Description: This is the date the patient was discharged from the referring hospital.

Referring Discharge Time

Field Name: REFERRING_DISCHARGE_TIME

Description: This is the time the patient was discharged from the referring hospital. The 24-hour Clock must be used.

Referring Glasgow Coma Scale – Eye Response

Field Name: EYE_OPENING

Description: This is the Glasgow Coma Scale Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

- 1 None (Includes patients who are intubated, sedated, etc.)
- 2 Pain **
- 3 Voice
- 4 Spontaneous
- UNK unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED, and one hour-post hospital arrival, and is then used to determine other symbolic fields like the patient's probability of survival.

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Referring Glasgow Coma Scale – Verbal Response

Field Name: VERBAL_RESPONSE

Description: Glasgow Coma Scale Verbal Response

Adults:

- 5 Oriented
- 4 Confused
- 3 Inappropriate words
- 2 Incomprehensible words (or sounds)
- 1 None (no verbal response) (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤ 2years):

- 5 Smiles, oriented to sounds, follows objects, interacts
- 4 Cries, but is consolable with inappropriate interactions
- 3 Inconsistently consolable, moaning
- 2 Inconsolable, agitated
- 1 No vocal response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not know or reasonably obtainable

GCS elements are useful in determining baselines and recovery outcomes in head injury along with ISS. It is also helpful in determining if head injury treatment follows the established standards.

Referring Glasgow Coma Score – Motor Response

Field Name: MOTOR_RESPONSE

Description: These are the Glasgow Coma Scale motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

- 6 Obeys commands
- 5 Localizing pain
- 4 Withdraw from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤ 2 years):

- 6 Appropriate response to stimulation
- 5 Localizing pain
- 4 Withdrawal from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, etc.)
- UNK Not known or reasonably obtainable

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Referring Initial GCS Total

Field Name: GLASGOW

Description: First recorded Glasgow Coma Scale score (total) in the referral setting.

Referring GCS Assessment Qualifiers

Field Name: PARALYTICS

Description: Documentation of factors potentially affecting the first assessment of the GCS by agencies and facilities.

- S Patient Chemically Sedated
- O Obstruction to the Patient's Eye
- I Patient Intubated
- IO Patient intubated and obstruction to eye
- SI Patient chemically sedated and intubated
- SO Patient chemically sedated and obstruction to eye
- SIO Patient chemically sedated, intubated, and obstruction to eye
- NA Not Applicable
- NOT Not Documented
- UNK Unknown

Referring Hospital Code

Field Name: FROM_HOSPITAL

Description: This is the facility code from which the patient transferred (referral hospital). This is the acute hospital from which the patient came.

- A patient sent from a private doctor's office, clinic, nursing home, ambulatory surgery center, etc. that is *not* an acute care facility is considered a transport directly from the scene—*not* a referral.
- A patient sent by private vehicle or other non-EMS means is not a "transfer" for the purposes of the Trauma Registry.

This is useful in determining referral patterns.

Referring Hospital Pulse

Field Name: PULSE

Description: This is the first palpable pulse rate expressed as a number per minute (ideally taken within the first 15 minutes). If asystolic prior to intervention, record as "0".

If the range of 0-300 is not high enough it can be adjusted by going into the codes, patterns, pulse.

Referring Hospital Respiratory Rate

Field Name: RESP_RATE

Description: This is the first unassisted patient respiratory rate expressed in numbers per minute (ideally taken in the first 15 minutes). If patient is apneic prior to intervention record "0".

Enter the respiratory rate from 0 to 72.

NA not applicable
UNK unknown
NOT not done

Referring Hospital Respiratory Assistance

Field Name: ASSISTING

Description: Determination of respiratory assistance associated with the initial referral hospital respiratory rate.

YES assisted respiratory rate, bagged
No unassisted respiratory rate
UNK unknown

Referring Hospital Oxygen Saturation Level

Field Name: OXIMETRY

Description: The oxygen saturation expressed as a percentage.

UNK unknown

Referring Hospital Supplemental Oxygen

Field Name: VS_O2

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

YES Supplemental oxygen
NO No supplemental oxygen
UNK Unknown

Referring Hospital Systolic Blood Pressure

Field Name: SYS_BP

Description: This is the systolic blood pressures initially assessed and recorded as a number (ideally taken within the first 15 minutes). If the patient is in full arrest before initial intervention record "0".

If you want you can have a number range check. Go to the codes, patterns, Systolic B/P.

NA Not applicable (i.e. CPR in progress)
UNK Unknown

Referring Hospital Temperature

Field Name: TEMPS

Description: The temperature recorded in Celsius at the referral hospital (ideally within 15 minutes of arrival).

NOTE: See preface or appendix G for a conversion chart.

Referring Procedure ICD9

Field Name: PROCEDURE_ICD9

Description: These are the ICD 9 codes for the procedures.

Operative and/or essential procedures are defined as procedures performed in the Operating Room, Emergency Department, or Intensive Care Unit that were essential to the diagnoses, stabilization, or treatment of the patient's specific injuries. Repeated diagnostic procedures (i.e. repeated CT scan) should not be required (record only the first procedure). You may list serial procedures like CT's by date in the description area if you choose.

NOTE: Refer to Appendix J or I, the ICD-9-CM book, or call for assistance (see page 1).

Referring Procedure Code

Field Name: PROCEDURE_CODE

Description: This is the 'easy' code for this procedure. This field also contains procedure codes that may have been entered earlier during scene or ED segments, so that you can see all procedures that have been done.

NOTE: for the procedure "EASY" code, if your facility has a procedure that you want to track, that is not on the "EASY" list, you can enter them under the "OTHER" code (if not done in OR, but are done in the ED), or under "OR" code (if done in the OR) and OTHERNON (for procedures done outside the ED and not in OR)

You will then need to look through the ICD9 pick list in it's entirety to find the code that best fits the procedure done. If unable to find a proper code match, then a 99.99 may be placed in the box.

Examples:

An EKG would be OTHER with an ICD9 code 89.52 if in the ED and OTHERNON if done on the floor.

An anterior cervical spinal fusion done in the operating room would be an "OR" easy code with an ICD of 81.02.

Data from this field cannot be used for any published data. Specific ICD9 procedure codes must be used for any published data.

NOTE: See Appendix I for assistance.

Referring Procedure Episode

Field Name: PROCEDURE_EPISODE

Description: This is the episode indicator for the "operative" procedure in the OR.

Use this number to identify groups of procedures done at the same time in the OR. For Example: All procedures done in the first visit to the OR would be given a number 1 for episode.

NA	Non operative procedure
1	First operative episode
2	Second operative episode
3	Third operative episode
4	Fourth operative episode
5	Fifth operative episode
6	Sixth operative episode
UNK	Unknown

Referring Procedure Location

Field Name: PROCEDURE_LOCATION_CODE

Description: This is the unit location where the procedure was done. This indicates whether procedures were done at the scene, in ED, in the OR, in radiology, etc.

Refer to NURSING.STATION file.

Referring Procedure Start Date

Field Name: PROCEDURE_START_DATE

Description: These are the dates the procedures were started. For therapeutic procedures that imply a longer interval (such as ventilation or intubation), this date is the start of the therapy.

Field Name: **PROCEDURE START TIME**

Description: These are the times the procedures were started. For OR procedures, this refers to the actual beginning, not the time the patient was prepped or brought into the room prior to incision. For therapeutic procedures that imply a longer interval (such as ventilation or intubation), this time is the start of the therapy. The 24-hour clock will be used.

Field Name: VS_LOCATION_CODE

Reference file: Patterns, VS_LOCATION_CODE

[illegible]

EMS SCENE/TRANSPORT

Agency/EMS Arrival Date

Field Name: ARRIVAL_DATE

Description: These are the dates of EMS arrival on the scene, referral hospital, or point of intercepts depending on the leg of transport defined.

This is useful in determining scene times and transport times.

Agency/EMS Arrival Time

Field Name: ARRIVAL_TIME

Description: These are the times of EMS arrival on the scene, referral hospital, or point of intercepts depending on the leg of transport defined. (i.e. the time the responding vehicle stopped moving)

This may be useful in determining scene times and transport times. The 24-hour clock will be used.

Agency/EMS Departure Date

Field Name: DEPARTURE_DATE

Description: These are the dates the agencies departed from the scene, with the patient, for any destination of the EMS transport. This can be from a scene, referral hospital, intercept point, or definitive care hospital.

Agency/EMS Departure Time

Field Name: DEPARTURE_TIME

Description: These are the times the agencies departed from the scene, with the patient, for any destination of the EMS transport. This can be from a scene, referral hospital, intercept point, or definitive care hospital. You will be using the 24-hour clock.

Agency/EMS Notification Date

Field Name: NOTIFY_DATE

Description: These are the dates the agencies were notified/dispatched.

Agency/EMS Notification Time

Field Name: NOTIFY_TIME

Description: These are the times the agencies were notified/dispatched. You will be using the 24-hour clock.

Agency/EMS Glasgow Coma Score – Eye Response

Field Name: EYE_OPENING

Description: These are the GCS Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

- 1 None (includes patients who are intubated, sedated, etc.)
- 2 Pain **
- 3 Voice
- 4 Spontaneous
- UNK Unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED and one hour-post hospital arrival. It is then used to determine other symbolic fields like the patient's probability of survival.

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Agency/EMS Glasgow Coma Scale – Verbal Response

Field Name: VERBAL_RESPONSE

Description: Glasgow Coma Scale Verbal Response

Adults:

- 5 Oriented
- 4 Confused
- 3 Inappropriate words
- 2 Incomprehensible words (or sounds)
- 1 None (no verbal response) (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤2years):

- 5 Smiles, oriented to sounds, follows objects, interacts
- 4 Cries but is consolable, inappropriate interactions
- 3 Inconsistently consolable, moaning
- 2 Inconsolable, agitated
- 1 No vocal response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not know or reasonably obtainable

GCS elements are useful in determining baselines and recovery outcomes in head injury along with ISS. IT is also helpful in determining if head injury treatment follows the established standards.

Agency/EMS Glasgow Coma Score – Motor Response

Field Name: MOTOR_RESPONSE

Description: These are the GCS motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

- 6 Obeys commands
- 5 Localizing pain
- 4 Withdraw from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤ 2 years):

- 6 Appropriate response to stimulation
- 5 Localizing pain
- 4 Withdrawal from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, etc.)
- UNK Not known or reasonably obtainable

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Agency/EMS Initial GCS Total

Field Name: GLASGOW

Description: First recorded GCS score.

Agency/EMS GCS Assessment Qualifiers

Field Name: PARALYTICS

Description: Documentation of factors potentially affecting the first assessment of the GCS by agencies and facilities.

- S Patient Chemically Sedated
- O Obstruction to the Patient's Eye
- I Patient Intubated
- IO Patient intubated and obstruction to eye
- SI Patient chemically sedated and intubated
- SO Patient chemically sedated and obstruction to eye
- SIO Patient chemically sedated, intubated, and obstruction to eye
- NA Not Applicable
- NOT Not Documented
- UNK Unknown

Agency/EMS Pulse

Field Name: PULSE

Description: These are the pulse rates from 0 to 300. The first palpable pulse rate expressed as a number per minute (ideally taken within the first 15 minutes). If asystolic prior to intervention, record as "0".

If this range is not high enough it can be adjusted by going into the codes, patterns, pulse.

Agency/EMS Respiratory Rate

Field Name: RESP_RATE

Description: These are the respiratory rates, this is the first unassisted patient respiratory rate expressed in numbers per minute (ideally taken within the first 15 minutes). If patient is apneic prior to intervention record as "0".

Enter the respiratory rate from 0 to 72.

NA Not applicable
UNK Unknown
NOT Not done

Agency/EMS Respiratory Assistance

Field Name: ASSISTING

Description: Determination of respiratory assistance associated with the initial referral hospital respiratory rate.

YES Assisted respiratory rate, bagged
NO Unassisted respiratory rate
UNK Unknown

Agency/EMS Oxygen Saturation Level

Field Name: OXIMETRY

Description: The oxygen saturation expressed as a percentage.

UNK Unknown

Agency/EMS Supplemental Oxygen

Field Name: VS_O2

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

YES Supplemental oxygen
NO No supplemental oxygen
UNK Unknown

Agency/EMS Systolic Blood Pressure

Field Name: SYS_BP

Description: These are the systolic blood pressures initially assessed and recorded as a number (ideally taken within the first 15 minutes). If the patient is in full arrest before initial intervention record as “0”.

You may have a number range check. Go to the pattern code, pattern, Systolic B/P.

NA Not applicable (i.e. CPR in progress)

UNK Unknown

Initial Transportation Method

Field Name: TRANS

Description: This is the transport code, the main means of transport for this patient.

This is not the specific agency that transported the patient. The specific information about the agency can be kept in the 'Agency' (Transport/Scene) section.

ALS ALS ambulance

AMB Ambulance (use if unknown ALS/BLS)

BLS BLS ambulance

FIX Fixed wing

HELI Helicopter

NA Not applicable

OTHER Other (includes: patients that were brought from nursing home, swing bed, or nursing floor on a cart or in a wheelchair, and commercial (non-EMS) transportation such as taxi).

POL Police vehicle

POV Private vehicle

UNK Unknown

WALK Walk in

Interfacility Transport Mode

Field Name: TRANSFER_MODE

Description: This is the means of transport from the referral facility to your facility.

This is not the specific agency that transported the patient. The specific information about the agency can be kept in the 'Agency' (Transport/Scene) section.

Pattern Information:

Patterns

ALS ALS ambulance

AMB Ambulance (use if unknown ALS/BLS)

BLS BLS ambulance

FIX Fixed wing

HELI Helicopter

NA Not applicable

OTHER Other (includes: patients that were brought from nursing home, swing bed, nursing floor on a cart or in a wheelchair, or commercial (non EMS) transportation such as taxi)

POL Police vehicle

POV Private vehicle

UNK Unknown

WALK Walk in

Agency/EMS Intubated

Field Name: INTUBATED

Description: This is whether the patient was intubated when the GCS was done. (i.e. endotracheal tube, trach, cricothyroidotomy, laryngeal mask airway(LMA), and combitube)

Was the patient intubated at the time this set of vital signs was taken?

Y Yes

N No

UNK Unknown

Agency/EMS Transporting Code

Field Name: TRANSPORT_AGENCY_CODE

Description: This is the transporting agency code. Refer to AGENCY code file. This can be prehospital or interfacility.

Agency/EMS Transporting Record Number

Field Name: TRANSPORT_RECORD_NO

Description: This is the patient's transport record number (transport ID number).

This can assist in merging of EMS records.

Agency/EMS Vital Sign Location Code

Field Name: VS LOCATION CODE

Description: This is where the vital signs were measured.

Reference file: VS_LOCATION_CODE

NOTES:

EMERGENCY DEPARTMENT

Alcohol Level

Field Name: ETOH

Description: This is the value of the blood alcohol. This is based on mg/dls.

This is the value tested at your facility.

Note: Blood alcohol level in **grams**/dl (example: .08) is to be multiplied by 1000, to get **mg**/dl (example: 80)

When test not ordered, NOT is an appropriate response.

This can be useful in determining the role of ETOH in trauma. One must also consider the rate of testing done at your facility.

Alcohol Use Indicator

Field Name: EV

Description: Use of alcohol by the patient.

N not suspected, not tested
Y confirmed by test, trace levels,
or by admission

NC Confirmed by test
YL Confirmed by test beyond legal limit
UNK if alcohol use is suspected but not confirmed
by test

ED Admission Date

Field Name: ED_ADM_DATE

Description: This is the ED admission date. If the patient was a direct admission the value would be "NA".

Note: If the patient was seen in the ED this should be the same date as the Hospital Arrival Date.

This information is necessary to determine ED length of stay (LOS).

ED Admission Time

Field Name: ED_ADM_TIME

Description: This is the ED Admission time. If the patient was a direct admission the value would be "NA". Use the 24-hour Clock.

Note: If the patient was seen in the ED this should be the same time as the Hospital Arrival Time.

This information is necessary to determine ED length of stay (LOS).

ED Airway

Field Name: AIRWAY

Description: This is the code for the type of airway used in your ED. Record the highest level of airway utilized during the ED stay.

BM	Bag and mask
CMT	Combi tube
CRIC	Cricothyroidotomy
EOA	Esophageal obturator
NASAL	Nasal airway/nasal trumpet
NC	Nasal cannula or face mask
NETT	Nasal ETT
NONE	No airway assistance face mask, nasal cannula
OETT	Oral ETT
ORAL	Oral airway
OTHER	Other (i.e. laryngeal mask airway (LMA))
TRACH	Tracheostomy

ED Discharge Date

Field Name: ED_DC_DATE

Description: This is the ED discharge date. If the patient was a direct admission – then value would be “NA”.

Note: This is the date the patient left the ED to go: home, to another facility, nursing unit (in house), or morgue (death).

This information is necessary to determine ED length of stay (LOS).

ED Discharge Time

Field Name: ED_DC_TIME

Description: This is the ED discharge time. If the patient was a direct admission the value would be “NA”. Use the 24-hour clock.

Note: This is the time the patient left the ED to go: home, to another facility, nursing unit (in -house), or morgue (death).

This information is necessary to determine ED length of stay (LOS).

NOTES: _____

ED Disposition Code

Field Name: ED_DISPOSITION_CODE

Description: This is the disposition of the patient when leaving the ED. This field MUST be completed. If the patient is a direct admission enter NA for not applicable.

D Death in ED after resuscitation attempt, failure to respond after 15 minutes)
DOA Dead on Arrival in ED

Brief in-hospital CPR or interventions do not preclude DOA designation.

- A patient arriving at the emergency department without signs of life (absence of pulse, spontaneous movement, respiratory effort, or effective cardiac electrical activity) and pulse

And

Adult

- Blunt trauma; prehospital CPR >5 min; or
- Penetrating trauma to the abdomen, chest, head, neck, groin; prehospital CPR >15 min

Child (age < 13 yrs)

- Blunt/ penetrating trauma, prehospital CPR >15 min. without spontaneous pulse

AMA Against medical advice

DE Died in the ED, < 15 minutes of CPR

FLOOR General floor bed

HH Home health

HOME Private dwelling, hotel

ICU Intensive Care Unit

NA Not applicable

OBS Observation

OR Operating room

OTHER Other (i.e. palliative care, psychiatric care, Triumph Hospital Central Dakotas, DETOX center, shelter or other residential institution, jail, or, mental health)

TELE Telemetry/step-down

TRANS Transferred to another acute care facility

This is necessary in determining length of stay (LOS) and cost per day.

ED Glasgow Coma Score – Eye Response

Field Name: EYE_OPENING

Description: These are the GCS Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

1 None (includes patients who are intubated, sedated, etc.)

2 Pain **

3 Voice

4 Spontaneous

UNK Unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED and one hour-post hospital arrival, and is then used to determine other symbolic fields like the patient's probability of survival.

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

ED Glasgow Coma Scale – Verbal Response

Field Name: VERBAL_RESPONSE

Description: Glasgow Coma Scale Verbal Response

Adults:

- 5 Oriented
- 4 Confused
- 3 Inappropriate words
- 2 Incomprehensible words (or sounds)
- 1 None (no verbal response) (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤2years):

- 5 Smiles, oriented to sounds, follows objects, interacts
- 4 Cries but is consolable, inappropriate interactions
- 3 Inconsistently consolable, moaning
- 2 Inconsolable, agitated
- 1 No vocal response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not know or reasonably obtainable

GCS elements are useful in determining baselines and recovery outcomes in head injury along with ISS. It is also helpful in determining if head injury treatment follows established standards.

ED Glasgow Coma Score – Motor Response

Field Name: MOTOR_RESPONSE

Description: These are the GCS motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

- 6 Obeys commands
- 5 Localizing pain
- 4 Withdraw from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤2 years):

- 6 Appropriate response to stimulation
- 5 Localizing pain
- 4 Withdrawal from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, etc.)
- UNK Not known or reasonably obtainable

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

ED Initial GCS Total

Field Name: GLASCOW

Description: First recorded GCS score.

ED GCS Assessment Qualifiers

Field Name: PARALYTICS

Description: Documentation of factors potentially affecting the first assessment of the GCS by agencies and facilities.

S Patient Chemically Sedated
O Obstruction to the Patient's Eye
I Patient Intubated
IO Patient intubated and obstruction to eye
SI Patient chemically sedated and intubated
SO Patient chemically sedated and obstruction to eye
SIO Patient chemically sedated, intubated, and obstruction to eye
NA Not Applicable
NOT Not Documented
UNK Unknown

ED Pulse

Field Name: PULSE

Description: These are the pulse rates from 0 to 300. The first palpable pulse rate expressed as a number per minute (ideally within the first 15 minutes). If asystolic prior to intervention, record as "0".

If this range is not high enough it can be adjusted by going into codes, patterns, pulse

ED Respiratory Rate

Field Name: RESP_RATE

Description: These are the respiratory rates; this is the first assisted (bagged) or unassisted patient respiratory rate expressed in numbers per minute (ideally within the first 15 minutes). If the patient is apneic prior to intervention record as "0".

Enter the respiratory rate from 0 to 72.

NA Not applicable
UNK Unknown
NOT Not done

ED Respiratory Assistance

Field Name: ASSISTING

Description: Determination of respiratory assistance.

YES Assisted respiratory rate, bagged
NO Unassisted respiratory rate
UNK Unknown

ED Oxygen Saturation Level

Field Name: OXIMETRY

Description: The oxygen saturation expressed as a percentage.

UNK Unknown

ED Supplemental Oxygen

Field Name: VS_O2

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

YES Supplemental oxygen
NO No supplemental oxygen
UNK Unknown

ED Systolic Blood Pressure

Field Name: SYS_BP

Description: These are the systolic blood pressures initially assessed and recorded as a number (ideally within the first 15 minutes). If the patient is in full arrest before initial intervention record as "0".

You may have a number range check. Go to the pattern code file.

NA Not applicable (i.e. CPR in progress)
UNK Unknown

ED Temperature

Field Name: TEMPS

Description: The temperature recorded in Celsius in the ED (ideally recorded within 15 minutes of arrival).

NOTE: See preface or appendix G for conversion chart.

UNK (Unknown)

ED Intubated

Field Name: INTUBATED

Description: This is whether the patient was intubated when the GCS was done. (i.e. endotracheal tube, trach, cricothyroidotomy, laryngeal mask airway(LMA), and combitube).

Was the patient intubated at the time this set of vital signs was taken?

Y Yes
N No
UNK Unknown

ED Procedure Code

Field Name: PROCEDURE_CODE

Description: This is the 'easy' code for this procedure. This field also contains procedure codes that may have been entered earlier during scene or ED segments, so you can see all procedures that have been done.

NOTE: for the procedure "EASY" code, if your facility has a procedure that you want to track, that is not on the "EASY" list, you can enter them under the "OTHER" code (if not done in OR, but are done in the ED), or under "OR" code (if done in the OR) and OTHERNON (for procedures done outside the ED and not in OR).

You will then need to look through the ICD9 pick list in it's entirety to find the code that best fits the procedure done. If unable to find a proper code match, then a 99.99 may be placed in the box.

Examples:

An EKG would be OTHER with an ICD9 code 89.52 if in the ED and OTHERNON if done on the floor.

An anterior cervical spinal fusion done in the operating room would be an "OR" easy code with an ICD of 81.02.

Data from this field cannot be used for any published data. Specific ICD9 procedure codes must be used for any published data.

Note: Appendix I can assist with this field.

ED Procedure Episode

Field Name: PROCEDURE_EPISODE

Description: This is the episode indicator for the "operative" procedure in the OR.

Use this number to identify groups of procedures done at the same time in the OR. For Example: All procedures done in the first visit to the OR would be given a number 1 for episode.

NA	Non operative procedure
1	First operative episode
2	Second operative episode
3	Third operative episode
4	Fourth operative episode
5	Fifth operative episode
6	Sixth operative episode
UNK	Unknown

ED Procedure ICD9

Field Name: PROCEDURE_ICD9

Description: These are the ICD9 codes for the procedures. Operative and/or essential procedures are defined as procedures performed in the operating room, emergency department, or intensive care unit that were essential to the diagnoses, stabilization, or treatment of the patient's specific injuries.

Repeated diagnostic procedures (e.g., repeated CT scan) are not required (record only the first procedure). You may list serial procedures like CT's by date in the description area if you choose.

NOTE: Refer to Appendix J or I, the ICD-9-CM book, or call for assistance (see page 1).

ED Procedure Location

Field Name: PROCEDURE_LOCATION_CODE

Description: This is the unit location where the procedure was done. This indicates whether procedures were done at the scene, in ED, in the OR, in radiology, etc.

Refer to NURSING.STATION file.

ED Procedure Start Date

Field Name: PROCEDURE_START_DATE

Description: These are the dates the procedures were started. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this date is the start of the therapy.

ED Procedure Start Time

Field Name: PROCEDURE_START_TIME

Description: These are the times the procedures were started. For OR procedures, this refers to the actual beginning, not the time the patient was prepped or brought into the room prior to incision. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this time is the start of the therapy. Use the 24-hour clock.

Toxicology

Field Name: TOX

Description: This is the toxicology (drug screen) results, substances that were found during drug screening or by admission.

NOTE: If the patient is on, or has received prescription medications (morphine, benzodiazepines, methadone etc) prior to screening, do not chart positive results.

AMPH	Amphetamines
BARB	Barbiturates
BEN	Benzodiazepines
COC	Cocaine
ETH	Ethanol Alcohol
LSD	LSD
MARI	Marijuana derivatives
METH	Methamphetamine
NEG	Negative
NOT	Not done
OPIA	Opiates
PCP	PCP
TRI	Tricyclic antidepressants
UNK	Unknown
OTHER	Paint, cough syrup, hairspray etc.

Drug Use Indicator

Field Name: TOX_TEST

Description: Use of drugs by the patient.

N	not tested or not suspected	YP	confirmed by test (prescription drug)
NC	confirmed by test	YI	confirmed by test (illegal use drug)
UNK	if drug use is suspected but not confirmed by test		

Trauma Activation

Field Name: TEAM_ACTIVATED_BY

Description: This is when the trauma team code/alert was requested.

PRE	Prior to arrival
ON	On arrival or within 5 minutes, includes walk-ins and private vehicles
LATE	Greater than five minutes, includes walk-ins and private vehicles
NOT	Not done when appropriate
NA	Not applicable

Trauma Team Readiness

Field Name: TEAM_NOTIFIED

Description: This is whether the trauma team was ready upon arrival.

YES	
NO	
NA	Not Applicable

ED Vital Sign Location Code

Field Name: VS_LOCATION_CODE

Description: This is where the vital signs were measured.

Reference file: Patterns, VS_LOCATION_CODE

NOTES: _____

INPATIENT COURSE

Admission Type

Field Name: ADMIT_TYPE

Description: This is the admit type. This identifies/classifies the type of admission.

- E Admitted through ED
 - D Direct admission (ED length of stay will = NA)
 - T Seen in ED then transferred out by EMS
 - R Seen in ED then released/ discharged, or referred elsewhere by POV
 - X Died in ED or DOA
-

Admission Service

Field Name: ADM_SVC

Description: This is the medical specialty of the physician who admits the patient to your facility, if the admit type is "R", "T", or "X" then the ADM_SVC will be "NA". This is not necessarily the service to which the patient is designated upon admission to the hospital, but the medical specialty of the patient's admitting physician.

Reference file: Patterns, ADM_SVC

Abbreviated Injury Scale Values

Field Name: AIS

Description: These are the AIS (Abbreviated Injury Scale) values. This is the abbreviated injury severity score (AIS 98 or 05) for this diagnosis. The information entered into this field is used to calculate the ISS (injury severity score).

The severity codes are not arbitrary. They are based on both threat to life and overall tissue damage. These codes are assigned based on injury documentation/studies, many times parameters/measurements. (i.e. amount of blood lost, length of laceration, measured thickness of head bleed etc.)

Patterns

- 1 Minimal
- 2 Moderate
- 3 Serious
- 4 Severe
- 5 Critical
- 6 Maximum)
- 9 Unknown or not applicable

NOTE: Helpful Link: <http://www.aaam1.org/faq/> or use the AIS Update 98 book or call for assistance (see page 1)

This is utilized to determine the injury severity scale (ISS).

Body Region

Field Name: REGION

Description: These are the body regions of injury where the diagnosis was found. The region can be derived from the ICD9, if the ICD9 is an injury code (800 - 959 range).

Reference: Patterns, REGION (area)

The information entered into this field is used to calculate the ISS (injury severity score).

Diagnosis

Field Name: DIAGNOSES

Description: These are the anatomic diagnoses. This is an Optional field and is not required by the State of ND.

Narratives should mention the severity of the injury, such as comminuted fracture vs. compound fracture and identify the body regions as to:

- Head/neck
- Face
- Chest
- Abdomen/pelvic contents
- Extremities/pelvic girdle
- External (skin)

If you have selected an ICD9 code there will be a default diagnosis description. This description is from the INJURY.CODES file and may not be as detailed as you wish. You do not have to accept the default.

Text fields can be searched for reports. Keep in mind, however, that it is faster to search "short" text fields. We encourage you to use short concise verbiage, and to use abbreviations that are accepted at your facility.

This data should NOT be used for any published reports, as it is not all-inclusive. Actual AIS codes should be used.

Inpatient Hospital Arrival Date

Field Name: HOSPITAL_ARRIVAL_DATE

Description: This is the date of the patient's initial physical arrival (passed through the doors) at the hospital (ED/OR/UNIT).

The defaulted date for this field is the last agency's hospital arrival date.

This information is necessary to determine inpatient length of stay (LOS).

Inpatient Hospital Arrival Time

Field Name: HOSPITAL_ARRIVAL_TIME

Description: This is the time the patient physically arrived at the hospital (ED/OR/UNIT). This information is received from the last transporting agency's destination arrival time (assuming they came via EMS). Use the 24-hour clock.

NOTE: if the ED record is a different time than the defaulted EMS value – use the ED record time.

This information is necessary to determine inpatient length of stay (LOS).

Other Transport Modes

Field Name: Other_Transport_Modes

Description: These are all of the modes of transportation used (except the mode that delivered the patient to your door, that is captured under Interfacility Transport Mode) during any part of the patients hospital stay.

Patterns

ALS	ALS ambulance
AMB	Ambulance (use if unknown ALS/BLS)
BLS	BLS ambulance
FIX	Fixed wing
HELI	Helicopter
NA	Not applicable
OTHER	Other (includes: patients that were brought from nursing home, swing bed, nursing floor on a cart or in a wheelchair, or commercial (non EMS) transportation such as taxi)
POL	Police vehicle
POV	Private vehicle
UNK	Unknown
WALK	Walk in

Inpatient ICD9 Diagnosis

Field Name: ICD9

Description: This is the ICD9 code for the diagnosis. You may enter as many diagnostic/injury codes as needed. Only the injury codes will have an AIS value and be included in the ISS.

Press < F2 > for assistance in selecting your ICD9s from the file INJURY.CODE that is a subset of the ICD9 file. The codes in the INJURY.CODES file are from the 800 - 959 range and have been described to help in determining the AIS.

There are several ways of looking up ICD9 codes:

- SEARCH
- BODY AREA
- KEY WORD TABLES
- TYPE IN KEYWORDS

Try these different ways of ICD9 searching to find the most comfortable for you.

NOTE: Helpful link to make sure the current ICD9 codes are utilized can be found at <http://icd9cm.chrisendres.com/> , or by using the ICD-9-CM book, or calling for assistance (see page 1)

ICU Length of Stay

Field Name: TOTAL_DAYS_ICU

Description: This is the total number of days spent in ICU units.

NOTE: Any stay \leq 24 hours in the ICU, SCCU, etc., is to be counted as 1 day. It will be considered day 2, 24 hours after the ICU, SCCU, and ETC. admission Time/Date value.

This information is useful in determining ICU costs for trauma. You may want to correlate with ISS or level of trauma code called to assist in determining appropriateness of the level of trauma code called.

Direct Admission Glasgow Coma Score – Eye Response

Field Name: EYE_OPENING

Description: These are the GCS Eye from the best side (the best response).

Glasgow coma scale Eye for adults and pediatrics.

- 1 None (includes patients who are intubated, sedated, etc.)
- 2 Pain **
- 3 Voice
- 4 Spontaneous
- UNK Unknown (i.e. both eyes swollen shut due to injury)

This field is used to calculate the GCS and revised trauma score (RTS) from the scene, ED and one hour-post hospital arrival, and is then used to determine other symbolic fields like the patient's probability of survival.

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Direct Admission Glasgow Coma Scale – Verbal Response

Field Name: VERBAL_RESPONSE

Description: Glasgow Coma Scale Verbal Response

Adults:

- 5 Oriented
- 4 Confused
- 3 Inappropriate words
- 2 Incomprehensible words (or sounds)
- 1 None (no verbal response) (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤2years):

- 5 Smiles, oriented to sounds, follows objects, interacts
- 4 Cries, but is consolable, inappropriate interactions
- 3 Inconsistently consolable, moaning
- 2 Inconsolable, agitated
- 1 No vocal response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not know or reasonably obtainable

GCS elements are useful in determining baselines and recovery outcomes in head injury along with ISS. It is also helpful in determining if head injury treatment follows established standards.

Direct Admission Glasgow Coma Score – Motor Response

Field Name: MOTOR_RESPONSE

Description: These are the GCS motor values from the best side.

Glasgow Coma Scale Motor Response:

Adult:

- 6 Obeys commands
- 5 Localizing pain
- 4 Withdraw from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, chemically paralyzed etc.)
- UNK Not known or reasonably obtainable

Pediatric (≤ 2 years):

- 6 Appropriate response to stimulation
- 5 Localizing pain
- 4 Withdrawal from pain
- 3 Flexion to pain
- 2 Extension to pain**
- 1 No motor response (includes patients who are intubated, sedated, etc.)
- UNK Not known or reasonably obtainable

** Pain = noxious physical stimuli that is intended to cause discomfort. This includes sternal rub, pinching the trapezius muscle, pressure on the nail beds, or pressure to the supra orbital ridge.

Direct Admission Initial GCS Total

Field Name: GLASGOW

Description: First recorded GCS score.

Direct Admission GCS Assessment Qualifiers

Field Name: PARALYTICS

Description: Documentation of factors potentially affecting the first assessment of the GCS by agencies and facilities.

- S Patient Chemically Sedated
- O Obstruction to the Patient's Eye
- I Patient Intubated
- IO Patient intubated and obstruction to eye
- SI Patient chemically sedated and intubated
- SO Patient chemically sedated and obstruction to eye
- SIO Patient chemically sedated, intubated, and obstruction to eye
- NA Not Applicable
- NOT Not Documented
- UNK Unknown

Direct Admission Pulse

Field Name: PULSE

Description: These are the pulse rates from 0 to 300. The first palpable pulse rate expressed as a number per minute (ideally within the first 15 minutes). If asystolic prior to intervention, record as "0".

If this range is not high enough it can be adjusted by going into the codes, patterns, pulse.

Direct Admission Respiratory Rate

Field Name: RESP_RATE

Description: These are the respiratory rates, this is the first unassisted patient respiratory rate expressed in numbers per minute (ideally within the first 15 minutes). If patient is apneic prior to intervention record "0".

Enter the respiratory rate from 0 to 72.

NA Not Applicable

UNK Unknown

NOT Not Done

Direct Admission Respiratory Assistance

Field Name: ASSISTING

Description: Determination of respiratory assistance associated with the respiratory rate.

YES Assisted respiratory rate, bagged

NO Unassisted respiratory rate

Direct Admission Oxygen Saturation Level

Field Name: OXIMETRY

Description: The oxygen saturation expressed as a percentage

Direct Admission Supplemental Oxygen

Field Name: VS_O2

Description: Determination of the presence of supplemental oxygen during assessment of the initial oxygen saturation level.

YES Supplemental oxygen

NO No supplemental oxygen

Direct Admission Systolic Blood Pressure

Field Name: SYS_BP

Description: These are the systolic blood pressures initially assessed and recorded as a number (ideally within in the first 15 minutes). If the patient is in full arrest before initial intervention record as "0".

If you want you can have a number range check. Go to the codes, patterns, Systolic B/P.

NA Not applicable (i.e. CPR in progress)

UNK Unknown

Direct Admission Temperature

Field Name: TEMPS

Description: The temperature recorded, ideally within 15 minutes of arrival.

NOTE: See preface or appendix G for conversion chart.

Injury Severity Score (ISS)

Field Name: ISS

Description: This field is a calculated injury severity score (ISS 1 – 75). This field will be defaulted when you use your enter key. This will also automatically be updated if you add diagnoses to your list.

NOTE: The AIS Score should not be assigned on a subjective basis, but as the result of coding the full 7-digit AIS Score through the current AIS coding book, or by calling for assistance (see page 1).

Length of Stay (LOS)

Field Name: LOS

Description: This is the patient's length of stay (LOS) in days.

NOTE: If the patient died in ED, was an ED stay only, or an ED transfer out, then this field should have a 0. If the patient leaves ED to go to OR/FLOOR/UNIT etc. (becomes an inpatient) then it will automatically be a 1. It will be considered day 2, 24 hours after the Hospital Arrival Time/Date value.

This information is useful in determining cost per day and correlation between injury severity and LOS

Inpatient Procedure Code

Field Name: PROCEDURE_CODE

Description: This is the 'easy' code for this procedure. This field also contains procedure codes that may have been entered earlier during scene or ED segments, so you can see all procedures that have been done.

NOTE: For the procedure "EASY" code, if your facility has a procedure that you want to track, that is not on the "EASY" list, you can enter them under the "OTHER" code (if not done in OR, but are done in the ED), or under "OR" code (if done in the OR) and OTHERNON (for procedures done outside the ED and not in OR)

You will then need to look through the ICD9 pick list in it's entirety to find the code that best fits the procedure done. If unable to find a proper code match, then a 99.99 may be placed in the box.

Examples:

An EKG would be OTHER with an ICD9 code 89.52 if in the ED and OTHERNON if done on the floor.

An anterior cervical spinal fusion done in the operating room would be an "OR" easy code with an ICD of 81.02.

Data from this field cannot be used for any published data. Specific ICD9 procedure codes must be used for any published data.

NOTE: Refer to Appendix I to assist with this field.

Inpatient Procedure Episode

Field Name: PROCEDURE_EPISODE

Description: This is the episode indicator for the "operative" procedure in the OR.

Use this number to identify groups of procedures done at the same time in the OR. For Example: All procedures done in the first visit to the OR would be given a number 1 for episode.

NA	Non operative procedure
1	First operative episode
2	Second operative episode
3	Third operative episode
4	Fourth operative episode
5	Fifth operative episode
6	Sixth operative episode
UNK	Unknown

Inpatient ICD9 Procedure

Field Name: PROCEDURE_ICD9

Description: These are the ICD 9 codes for the procedures.

Operative and/or essential procedures are defined as procedures performed in the operating room, emergency department, or intensive care unit that were essential to the diagnoses, stabilization, or treatment of the patient's specific injuries.

Repeated diagnostic procedures (i.e. repeated CT scan) should not be required (record only the first procedure). You may list serial procedures like CT's by date in the description area if you choose.

NOTE: Refer to Appendix J or I, the ICD-9-CM book, or call for assistance (see page 1).

Inpatient Procedure Location

Field Name: PROCEDURE_LOCATION_CODE

Description: This is the unit location where the procedure was done. This indicates whether procedures were done at the scene, ED, OR, radiology, etc.

Refer to NURSING.STATION file.

Inpatient Procedure Start Date

Field Name: PROCEDURE_START_DATE

Description: These are the dates the procedures were started. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this date is the start of the therapy.

Inpatient Procedure Start Time

Field Name: PROCEDURE_START_TIME

Description: These are the times the procedures were started. For OR procedures, this refers to the actual beginning, not the time the patient was prepped or brought into the room prior to incision. For therapeutic procedures that imply a longer interval, (such as ventilation or intubation) this time is the start of the therapy. Use the 24-hour clock.

Inpatient Vital Sign Location Code

Field Name: VS_LOCATION_CODE

Description: This is where the vital signs were measured.

Reference file: VS_LOCATION_CODE

NOTES: _____

Vital Sign Number

Field Name: VS_NUMBER

Description: Vital Sign numbers: initial, one hour, and last sets of vital signs from all agencies and facilities. Decimals up to and including .09 may be used for additional sets of vitals.

Patterns

- 1 (First scene, initial)
 - 1.0 (First Scene, 1 hour)
 - 1.1 (Second Scene)
 - 1.2 (Third Scene)
 - 1.3 (Fourth Scene)
 - 1.9 (Last Scene)
 - 2 (First ED, initial)
 - 2.0 (First ED, 1 hour)
 - 2.1 (Second ED)
 - 2.2 (Third ED)
 - 2.3 (Fourth ED)
 - 2.9 (Last ED)
 - 3 (Pre Operative)
 - 3.0 (Pre Operative)
 - 3.5 (Second interfacility agency, last)
 - 3.6-3.9 (Interfacility, additional as needed)
 - 4 (Referring Facility Admission, initial)
 - 4.0 (Referring Facility Admission, 1 hour)
 - 4.1 (Referring Facility Discharge)
 - 4.9 (Last Referring)
-

DISABILITY ASSESSMENT – DISCHARGE

Inpatient Discharge Date

Field Name: HOSPITAL_DISCHARGE_DATE

Description: This is the date the patient was discharged from the hospital as an *inpatient*, transferred out after admission, or death in the hospital.

NOTE: If the patient was an ED stay only, transfer out from ED, ED death, or DOA, then this field will be **NA**

This information is necessary to determine inpatient length of stay (LOS).

Inpatient Discharge Time

Field Name: HOSPITAL_DISCHARGE_TIME

Description: This is the time the patient was discharged from, transferred from, or died at the hospital as an *inpatient*.

NOTE: If the patient was an ED stay only, transfer out from ED, ED death, or DOA, then this field will be **NA**.
Use the 24-hour clock.

This information is necessary to determine inpatient length of stay (LOS).

Facility Discharge Destination Code

Field Name: DC_DESTINATION_CODE

Description: This is the discharge destination code. This is the patient's specific destination after discharge. It will either be HOME or a specifically named facility.

Inpatient Discharge Disposition Code

Field Name: DC_DISPOSITION_CODE

Description: This is the discharge disposition code. This classifies the patient's disposition after inpatient discharge. This is not the specific facility the patient was transferred to.

D	Death
HOME	Home
HH	Home health
HOSP	Transfer to another acute care hospital
JAIL	Jail or detention center
NA	Not applicable, not an inpatient
NH	Nursing home
REHAB	Rehabilitation center
SWING	Hospital long term care (LTC) bed (i.e. transitional care unit (TCU))
OTHER	Other (i.e. palliative care, psychiatric care, Triumph Hospital Central Dakotas, DETOX center, shelter or other residential institution)
AMA	Against medical advice, even when a specific destination is known
HOSPICE	Hospice care

Discharge Transfer Mode

Field Name: DC_TRANSFER_MODE

Description: This is the mode (method) of transportation by which the patient left (was discharged) from the hospital. If the patient has died, N/A is the appropriate choice.

Patterns

ALS	ALS ambulance
AMB	Ambulance (use if unknown if ALS/BLS)
BLS	BLS ambulance
FIX	Fixed wing
HELI	Helicopter
NA	Not applicable
OTHER	Other (includes: patients that were brought from nursing home, swing bed, nursing floor on a cart or in a wheelchair, or commercial (non EMS) transportation such as taxi)
POL	Police vehicle
POV	Private vehicle
UNK	Unknown
WALK	Walk in

Financial Amount Collected

Field Name: AMT_COLLECTED

Description: This is an optional field and is not downloaded by the state. The financial field is the amount collected. This is the dollar amount finally collected on the bill. It is important to wait long enough (30-120 days, at least) before obtaining this amount, since payments may be received at various times.

This data can be utilized to determine the reimbursement rates of trauma care.

Organs Donated

Field Name: ORGANS_DONATED

Description: These are the organs that were donated.

BONE	Bone
CORNEA	Cornea
EAR	Ear
HEART	Heart
KIDNEY	Kidney
LIVER	Liver
LUNG	Lung)
MARROW	Marrow
NOT	Not Done/Not Requested
OTHER	Other, small bowel, tissue
PANCREAS	Pancreas
REF	Refused by family or coroner
SKIN	Skin
UNK	Unknown
UNSUIT	Deemed unsuitable for use by Life Source
VALVES	Heart Valves

Patient Outcome

Field Name: OUTCOME

Description: This is the patient's outcome: 'A' or 'D'.

This is the patient's final outcome at hospital discharge.

A Alive
D Died

Payment Source

Field Name: PAYMENT_SOURCE

Description: These are the payment sources. List primary insurance first, list others if available

Patterns

AUTO	Automotive
BCBS	Blue Cross/Blue Shield; from any state
COM	Commercial insurance (includes government except IHS)
HMO	Health Maintenance Organization
IHS	Indian Health Service
MCAID	Medicaid (any medical assistance)
MCARE	Medicare
NOBILL	Not billed
OTHER	Other (i.e. international health plans (Canadians))
SELF	Self pay
UNK	Unknown
WORK	Workers compensation
GOV	Other Government (i.e. Champus)

Total Hospital Charges

Field Name: CHARGE_TOTAL

Description: This is an optional field and is not downloaded to the state.

This is the filled field for TOTAL.CHARGE.

This is the total amount of the hospital bill. This will include components, such as Physician, Outpatient, Radiology, Pharmacy, etc. It is important to be consistent when obtaining this amount, so that charges over time will be comparable.

This value helps to determine the total “cost” of Trauma in the state.

Severity Method

Field Name: SEVERITY_METHOD

Description: This is the severity coding methodology.

This is the severity system (AIS 98 or AIS 05) used for the AIS coding.

Total Ventilator Days

Field Name: VENTDAYS

Description: The total number of patient days spent on a mechanical ventilator (including all episodes).

Hospital Complications

Field Name: COMP

Description: Any medical complication that occurred during the patient's stay at your hospital.

NOTE: See appendix M for definitions.

ACS	Abdominal Compartment Syndrome
ABD	Abdominal Fascia
ARF	Acute Renal Failure
ARDS	Acute Respiratory Distress Syndrome
BASE	Base Deficit
BLD	Bleeding
CPR	Cardiac Arrest with CPR
COAG	Coagulopathy
COMA	Coma
CVA	Stroke/CVA
DECUB	Decubitus Ulcer
DDX	Delayed Diagnosis
DISRUPT	Wound Disruption
DVT	Deep Vein Thrombosis/Thrombophlebitis
ECS	Extremity Compartment Syndrome
FAIL	Graft or Prosthetic or Flap failure
ICP	Intracranial Pressure
INTUB	Unplanned Intubation
MDX	Missed Diagnosis
MI	Myocardial Infarction
NO	No Medical Complication Occurred
ORGAN	Organ/Space Surgical Site Infection
PE	Pulmonary Embolism
PNEU	Pneumonia
SEPSIS	Systemic Sepsis
SURGINF	Deep Surgical Infection
SUP	Superficial Surgical Site Infection
WITH	Drug or Alcohol Withdrawal

Appendix A

Agency Codes

Appendix A

Agency Codes

Agency No Agency Name

001 Almont Ambulance Service, Almont ND
002 Aneta Ambulance Service, Aneta ND
003 Ashley Ambulance Service, Ashley ND
004 Community Ambulance Service, Beach ND
005 Belfield Ambulance Service, Inc., Belfield ND
006 Berthold Ambulance Service, Inc., Berthold ND
007 Mercer County Ambulance Service, Inc. (Beulah), Hazen ND
008 Coteau Properties Co. Ambulance Service, Beulah ND
009 Dakota Gasification Co. Ambulance Service, Beulah ND
012 Metro Area Ambulance Service, Inc., Bismarck ND
014 Bottineau Ambulance Service, Bottineau ND
015 Bowbells Ambulance Service, Bowbells ND
016 Bowdon Ambulance Service, Bowdon ND
017 Bowman Ambulance Squad, Inc., Bowman ND
018 Ambulance Service, Inc., Breckenridge MN
019 Towner County Ambulance Service, Inc., Cando ND
020 Carpio Ambulance Service, Inc., Carpio ND
021 Carrington Health Center Ambulance, Carrington ND
022 Carson Ambulance Service, Carson ND
023 Casselton Ambulance Service, Inc., Casselton ND
024 Cavalier Ambulance Service, Inc., Cavalier ND
025 Oliver County Ambulance Service, Center ND
026 Cooperstown Ambulance Service, Cooperstown ND
027 Divide County Ambulance Service, Crosby ND
028 Lake Region Ambulance Service, Devils Lake ND
029 Dickinson Area Ambulance Service, Inc., Dickinson ND
030 Drayton Volunteer Ambulance Association, Inc., Drayton ND
031 Edgeley Ambulance Service, Edgeley ND
032 Edmore Volunteer Ambulance Service, Edmore ND
033 Ellendale Community Ambulance Service, Ellendale ND
034 Esmond Community Ambulance Service, Esmond ND
035 F-M Ambulance Service, Inc., Fargo ND
036 Fessenden Ambulance Service, Fessenden ND
037 Finley Ambulance Service, Finley ND
038 Flasher Ambulance Service, Flasher ND
040 Sargent County Ambulance Service (Forman), Forman ND
041 Standing Rock Ambulance Service, Ft. Yates ND
042 Gackle Ambulance Service, Gackle ND
043 Garrison-Max Ambulance District, Max ND
044 Glen Ullin Area Ambulance Service, Glen Ullin ND
045 Glenburn Area Ambulance Service, Inc., Glenburn ND
046 Goodrich Ambulance Service, Goodrich ND
047 Valley Ambulance & Rescue Service, Inc., Grafton ND
048 Altru Health System Ambulance Service, Grand Forks ND
049 Grenora Ambulance Service, Grenora ND
050 Halliday Ambulance Service, Halliday ND
051 Hankinson Volunteer Ambulance Service, Hankinson ND
052 Harvey Ambulance Service, Inc., Harvey ND
053 Mercer County Ambulance Service, Inc., Hazen ND
054 Hebron Ambulance Service, Hebron ND
055 West River Ambulance Service, Hettinger ND
056 Hillsboro Ambulance Service, Hillsboro ND
058 Hope Ambulance Service, Hope ND
059 Hunter Ambulance Service, Hunter ND
061 Kenmare Ambulance Service, Kenmare ND

062 Killdeer Area Ambulance Service, Inc., Killdeer ND
063 Kindred Area Ambulance Service, Inc., Kindred ND
064 Kulm Ambulance Corps, Inc., Kulm ND
065 Lakota Ambulance Service, Lakota ND
067 Langdon Ambulance Service, Langdon ND
068 Lansford Ambulance Service, Lansford ND
069 Larimore Ambulance Service, Inc., Larimore ND
070 Leeds Ambulance Service, Leeds ND
071 Lidgerwood Community Ambulance Service
072 Emmons County Ambulance Service, Linton ND
073 First Medic Ambulance of Ransom County, Inc., Lisbon ND
074 Maddock Ambulance Service, Maddock ND
075 Ryder-Makoti Ambulance Service, Ryder ND
076 Garrison Ambulance District, Garrison ND
077 West Trail Ambulance Service, Mayville ND
078 McClusky Rural Ambulance District, McClusky ND
079 McHenry Ambulance Service, Binford ND
080 McIntosh Volunteer Fire Dept Ambulance Service, McIntosh ND
081 Standing Rock Health System, Inc., McLaughlin SD
082 McVile Community Ambulance Service, McVile ND
083 Medina Ambulance Service, Medina ND
084 Billings County Ambulance Service, Medora ND
085 Michigan Area Ambulance Service, Inc., Michigan ND
086 Sargent County Ambulance Service, Milnor ND
087 Minnewaukan Ambulance Service, Minnewaukan ND
088 Community Ambulance Service Inc., Minot ND
089 Mohall Ambulance Service, Mohall ND
090 Mott Ambulance Service, Mott ND
091 Munich Rural Ambulance, Munich ND
092 Napoleon Ambulance Service, Napoleon ND
093 New England Ambulance Service, New England ND
094 New Leipzig Ambulance Service, New Leipzig ND
095 Community Ambulance Service of New Rockford, New Rockford ND
096 New Salem Ambulance Service, New Salem ND
097 New Town Community Ambulance Service District, New Town ND
098 Northwood Ambulance Service, Northwood ND
099 Oakes Vol. Ambulance Service, Oakes ND
100 Page Ambulance Service, Page ND
101 Park River Volunteer Ambulance Service, Inc., Park River ND
102 Parshall Rural Ambulance Service, Inc., Parshall ND
103 Pembina Ambulance Service, Inc., Pembina ND
104 Plaza Ambulance Service, Plaza ND
105 Portal Ambulance Service, Portal ND
106 Powers Lake Ambulance Association, Powers Lake ND
107 Ray Community Ambulance District, Ray ND
108 Regent Ambulance Service, Regent ND
109 Richardton-Taylor Ambulance Service, Richardton ND
110 Riverdale Ambulance Department, Riverdale ND
111 Rock Lake Ambulance Service, Rock Lake ND
112 Rolette Ambulance Service, Inc., Rolette ND
113 Community Ambulance Service, Rolla ND
114 Rugby Emergency Ambulance Service, Rugby ND
115 Sherwood Rural Ambulance Service, Sherwood ND
116 Stanley Ambulance Service, Stanley ND
117 Kidder County Ambulance Service, Steele ND
118 Tioga Ambulance Service, Tioga ND
119 Towner Fire/ Ambulance & Rescue, Inc., Towner ND
120 Turtle Lake Ambulance Service, Turtle Lake ND
121 Underwood Ambulance Service, Underwood ND
122 Coal Creek Station Ambulance Service, GRE, Underwood ND

123 Falkirk Mining Company Ambulance Service, Underwood ND
124 Upham RFPD Ambulance Service, Upham ND
125 Barnes County/City Ambulance, Valley City ND
126 Velva Ambulance Service, Velva ND
127 Walhalla Ambulance Service, Walhalla ND
128 Washburn Volunteer Ambulance Service, Washburn ND
129 McKenzie County Ambulance Service, Watford City ND
130 Westhope Ambulance Service, Westhope ND
131 Williston Ambulance Service, Williston ND
133 Wilton Rural Ambulance Service, Wilton ND
134 Wing Rural Ambulance, Wing ND
135 Wishek Ambulance Service, Wishek ND
136 Wyndmere-Barney Rural Ambulance District, Wyndmere ND
137 319th Medical Group Emergency Services, AFB, Grand Forks ND
138 Lemmon EMT Assn., Lemmon SD
139 Metro-Area Ambulance Service, Inc., Bismarck ND
140 New Leipzig Ambulance Service, Elgin ND
141 Norman County Ambulance Service
142 Spirit Lake Emergency Medical Services, Fort Totten ND
143 Belcourt Ambulance Service, Belcourt ND
144 F-M Ambulance Service, Inc, West Fargo Unit, Fargo ND
145 Golden Heart EMS Ambulance Service, Rugby ND
146 Marmarth Ambulance Squad, Marmarth ND
150 Jamestown Area Ambulance, Jamestown ND
153 Community Volunteer Ambulance Service- LaMoure

700 Other Minnesota Ground
701 Other Montana Ground
702 Other South Dakota Ground
703 Other Canadian Ground

POL Police Vehicle
POV Private Vehicle
EMS UNK Unknown EMS
NA Not Applicable
UNK Unknown

Air Services

601 Avera St Luke's Careflight, Aberdeen SD
602 Merit Care LifeFlight, Fargo ND
603 Trinity Hospital – NorthStar Criticair, Minot ND
604 Bismarck Air Medical, LLC, Mandan ND
699 Other - out of state air

Appendix B

Health Facility Codes

Appendix B

Health Facility Codes

ID Name

Hospitals

5082 Air Force Base, Grand Forks ND
5081 Air Force Base, Minot ND
5021 Altru Hospital, Grand Forks ND
5057 Anne Carlsen School, Jamestown ND
5001 Ashley Medical Center, Ashley ND
5008 Carrington Health Center, Carrington ND
5029 Cavalier County Memorial Hospital, Langdon ND
5063 Prairie Psychiatric Center, Fargo ND
5059 Community Memorial Hospital, Turtle Lake ND
5010 Cooperstown Medical Center, Cooperstown ND
5042 First Care Health Center, Park River ND
5019 Garrison Memorial Hospital, Garrison ND
5046 Heart of America Medical Center, Rugby ND
5026 Hillsboro Medical Center Hospital, Hillsboro ND
5067 Innovis Health, Fargo ND
5014 Jacobson Memorial Hospital Care Center, Elgin ND
5027 Jamestown Hospital, Jamestown ND
5028 Kenmare Community Hospital, Kenmare ND
5030 Linton Hospital, Linton ND
5031 Lisbon Area Health Services, Lisbon ND
5051 McKenzie County Memorial Hospital, Watford City ND
5003 Medcenter One, Inc., Bismarck ND
5012 Mercy Hospital of Devils Lake, Devils Lake ND
5050 Mercy Hospital of Valley City, Valley City ND
5052 Mercy Medical Center, Williston ND
5018 MeritCare Hospital, Fargo ND
5068 MeritCare South University, Fargo ND
5047 Mountrail County Medical Center, Stanley ND
5035 Nelson County Health System, McVile ND
5060 North Dakota State Hospital, Jamestown ND
5040 Northwood Deaconess Health Center, Northwood ND
5041 Oakes Community Hospital, Oakes ND
5009 Pembina County Memorial Hospital, Cavalier ND
5084 PHS Hospital, Fort Totten ND
5085 PHS Hospital, Fort Yates ND
5086 PHS Hospital, New Town ND
5045 Presentation Medical Center, Rolla ND
5083 Quentin Burdick CHCF, Belcourt ND
5066 Richard P. Stadter Psychiatric Center, Grand Forks ND
5043 Richardton Health Center, Inc., Richardton ND
5024 Sakakawea Medical Center, Hazen ND
5064 Triumph Hospital Central Dakotas, Mandan ND
5065 Triumph Hospital Central Dakotas, Fargo ND
5006 Southwest Healthcare Services, Bowman ND
5004 St. Alexius Medical Center, Bismarck ND
5023 St. Aloisius Medical Center, Harvey ND
5005 St. Andrew's Health Center, Bottineau ND
5054 St. Joseph's Hospital & Health Center, Dickinson ND
5011 St. Luke's Hospital, Crosby ND
5048 Tioga Medical Center, Tioga ND
5061 Towner County Medical Center, Cando ND

5036 Trinity - St. Josephs, Minot ND
5055 Trinity Hospitals, Minot ND
5034 Union Hospital, Mayville ND
5020 Unity Medical Center, Grafton ND
5080 Veterans Administration, Fargo ND
5025 West River Regional Medical Center, Hettinger ND
5053 Wishek Community Hospital, Wishek ND

Rehabilitation Facilities

6001 Medcenter One, Bismarck ND
6002 St. Alexius Medical Center, Bismarck ND
6003 MeritCare Health System, Fargo ND
6099 Altru Rehabilitation Center, Grand Forks ND
6004 Trinity Health, Minot ND

Appendix C

Out of State Health Facility Codes

Appendix C

Out of State Health Facility Codes

ID Name

Out of State

5400 Abbott Northwest -MN
5401 Abbott Northwest -MN
5420 Avera Mckennan -SD
5421 Avera St. Lukes -SD
5503 Canada - Other Hospitals
5402 Children's Hospital -MN
5504 Colorado - Other Hospitals
5431 Denver Children's -CO
5403 Hennepin County -MN
5500 Minnesota - Other Hospitals
5422 MobridgeRegional Hospital - SD
5502 Montana - Other Hospitals
5404 North Memorial -MN
5423 Rapid City Regional -SD
5405 Regions Hospital -MN
5424 Sioux Valley -SD
5501 South Dakota - Other Hospitals
5088 St. Francis Medical Center -MN
5406 St. Marys Regional -MN
5430 University of Colorado -CO
5407 University of Minnesota -MN

5500 Other Minnesota Hospital
5501 Other South Dakota Hospital
5502 Other Montana Hospital
5503 Other Canadian Hospital
5504 Other Colorado Hospital
9999 Unspecified

Appendix D

Skilled Nursing Home Facility Codes

Appendix D

Skilled Nursing Home Facilities

ID Name

Skilled Nursing Home Facilities

1101 Aneta Parkview Health Center, Aneta ND
1102 Arthur Good Samaritan Center, Arthur ND
1103 Ashley Medical Center, Ashley ND
1104 Knife River Care Center, Beulah ND
1105 Baptist Home, Inc., Bismarck ND
1106 Medcenter One Subacute Care Unit, Bismarck ND
1107 Missouri Slope Lutheran Care Center, Bismarck ND
1108 St. Alexius Transitional Care Unit, Bismarck ND
1109 Medcenter One St. Vincents Care, Bismarck ND
1110 Bottineau Good Samaritan Center, Bottineau ND
1112 Southwest Healthcare Services, Bowman ND
1113 Towner County Living Center, Cando ND
1115 Golden Acres Manor, Carrington ND
1116 Wedgewood Manor, Cavalier ND
1117 Cooperstown Medical Center, Cooperstown ND
1118 Crosby Good Samaritan Center, Crosby ND
1119 Devils Lake Good Samaritan Center, Devils Lake ND
1120 Heartland Care Center, Devils Lake ND
1121 St. Benedict's Health Center, Dickinson ND
1122 St. Luke's Home, Dickinson ND
1123 Dunseith Community Nursing Home, Dunseith ND
1124 Jacobson Memorial Hospital Care Center, Elgin ND
1125 Prince of Peace Care Center, Ellendale ND
1126 Maryhill Manor, Enderlin ND
1127 Bethany Homes, Fargo ND
1129 Elim Care Center, Fargo ND
1130 Manorcare Health Services, Fargo ND
1131 MeritCare Hospital TCU, Fargo ND
1132 Rosewood on Broadway, Fargo ND
1133 Villa Maria Health Care, Fargo ND
1134 Four Seasons Health Care Center, Forman ND
1135 Garrison Memorial Hospital Nursing Facility, Garrison ND
1136 Benedictine Living Center of Garrison, Garrison ND
1137 Marian Manor Healthcare Center, Glen Ullin ND
1138 Lutheran Sunset Home, Grafton ND
1139 Valley Eldercare Center, Grand Forks ND
1140 Woodside Village, Grand Forks ND
1141 St. Gerard's Community Nursing Home, Hankinson ND
1142 St. Aloisius Medical Center-LTC, Harvey ND
1143 Tri-County Retirement and Nursing Home, Hatton ND
1144 Hillcrest Care Center, Hettinger ND
1145 Hillsboro Medical Center Nursing Home, Hillsboro ND
1146 Central Dakota Village, Jamestown ND
1147 Hi-Acres Manor Nursing Center, Jamestown ND
1148 Kenmare Community Hospital SNU, Kenmare ND
1149 Hill Top Home of Comfort, Killdeer ND
1150 Lakota Good Samaritan Center, Lakota ND
1151 St. Rose Care Center, Lamoure ND
1152 Maple Manor Care Center, Langdon ND
1153 Larimore Good Samaritan Center, Larimore ND
1155 North Dakota Veterans Home, Lisbon ND
1156 Parkside Lutheran Home, Lisbon ND

1157 Dacotah Alpha, Mandan ND
1158 Medcenter One Care Center, Mandan ND
1159 Luther Memorial Home, Mayville ND
1160 Nelson County Health System Care Center, McVile ND
1161 Manorcare Health Services, Minot ND
1162 Trinity Homes, Minot ND
1163 North Central Good Samaritan Center, Mohall ND
1164 Mott Good Samaritan Nursing Center, Mott ND
1165 Napoleon Care Center, Napoleon ND
1166 Lutheran Home of the Good Shepherd, New Rockford ND
1167 Elm Crest Manor, New Salem ND
1169 Northwood Deaconess Health Center, Northwood ND
1170 Oakes Manor Good Samaritan Center, Oakes ND
1171 Osnabrock Good Samaritan Center, Osnabrock ND
1172 Park River Good Samaritan Center, Park River ND
1173 Rock View Good Samaritan Center, Parshall ND
1174 Rolette Community Care Center, Rolette ND
1175 Heart of America Nursing Facility, Rugby ND
1176 Mountrail Bethel Home, Stanley ND
1177 Medcenter One Golden Manor, Steele ND
1178 Strasburg Nursing Home, Strasburg ND
1179 Tioga Medical Center LTC, Tioga ND
1180 Prairieview Health Care Center, Inc., Underwood ND
1181 Sheyenne Care Center, Valley City ND
1182 Souris Valley Care Center, Velva ND
1183 St. Catherine's Living Center, Wahpeton ND
1184 Pembilier Nursing Center, Walhalla ND
1185 The Good Shepherd Home, Watford City ND
1186 Westhope Home, Westhope ND
1187 Bethel Lutheran Home, Williston ND
1188 Wishek Home for the Aged, Wishek ND

Appendix E

ND/SD/MN Zip Codes

NORTH DAKOTA

58001 Abercrombie 701
58002 Absaraka 701
58210 Adams 701
58472 Adrian 701
58310 Agate 701
58220 Akra 701
58830 Alamo 701
58831 Alexander 701
58454 Alfred 701
58031 Alice 701
58845 Alkabo 701
58520 Almont 701
58311 Alsen 701
58833 Ambrose 701
58004 Amenias 701
58620 Amidon 701
58710 Anamoose 701
58212 Aneta 701
58711 Antler 701
58830 Appam 701
58558 Apple Valley 701
58261 Ardoch 701
58494 Arena 701
58005 Argusville 701
58365 Armourdale 701
58835 Arnegard 701
58006 Arthur 701
58214 Arvilla 701
58413 Ashley 701
58734 Aurelia 701
58710 Aylmer 701
58007 Ayr 701
58220 Backoo 701
58386 Baker 701
58521 Baldwin 701
58712 Balfour 701
58313 Balta 701
58713 Bantry 701
58421 Barlow 701
58008 Barney 701
58344 Bartlett 701
58384 Barton 701
58216 Bathgate 701
58773 Battleview 701
58621 Beach 701
58316 Belcourt 701
58784 Belden 701
58622 Belfield 701
58716 Benedict 701
58562 Bentley 701
58792 Bergen 701
58415 Berlin 701
58718 Berthold 701
58788 Berwick 701
58523 Beulah 701
58416 Binford 701
58317 Bisbee 701
58501 Bismarck 701
58502 Bismarck 701

58503 Bismarck 701
58504 Bismarck 701
58505 Bismarck 701
58506 Bismarck 701
58507 Bismarck 701
58718 Blaisdell 701
58009 Blanchard 701
58401 Bloom 701
58563 Blue Grass 701
58801 Bonetrail 701
58421 Bordulac 701
58318 Bottineau 701
58721 Bowbells 701
58418 Bowdon 701
58225 Bowesmont 701
58623 Bowman 701
58524 Braddock 701
58017 Brampton 701
58356 Brantford 701
58570 Breien 701
58319 Bremen 701
58104 Briarwood 701
58351 Brinsmade 701
58529 Brisbane 701
58321 Brockton 701
58420 Buchanan 701
58639 Bucyrus 701
58011 Buffalo 701
58623 Buffalo Springs 701
58801 Buford 701
58722 Burlington 701
58495 Burnstad 701
58646 Burt 701
58723 Butte 701
58218 Buxton 701
58219 Caledonia 701
58352 Calio 701
58323 Calvin 701
58324 Cando 701
58528 Cannon Ball 701
58528 Cannonball 701
58783 Carbury 701
58725 Carpio 701
58421 Carrington 701
58529 Carson 701
58838 Cartwright 701
58012 Casselton 701
58422 Cathay 701
58220 Cavalier 701
58013 Cayuga 701
58530 Center 701
58079 Chaffee 701
58831 Charbonneau 701
58763 Charlson 701
58423 Chaseley 701
58015 Christine 701
58325 Churchs Ferry 701
58492 Clements 701
58424 Cleveland 701

58016 Clifford 701
58758 Clifton 701
58352 Clyde 701
58017 Cogswell 701
58531 Coleharbor 701
58018 Colfax 701
58844 Colgan 701
58046 Colgate 701
58727 Columbus 701
58220 Concrete 701
58233 Conway 701
58425 Cooperstown 701
58425 Cooperstwn 701
58830 Corinth 701
58721 Coteau 701
58734 Coulee 701
58426 Courtenay 701
58327 Crary 701
58040 Crete 701
58365 Crocus 701
58730 Crosby 701
58222 Crystal 701
58467 Crystal Springs 701
58223 Cummings 701
58224 Dahlen 701
58413 Danzig 701
58021 Davenport 701
58428 Dawson 701
58429 Dazey 701
58731 Deering 701
58060 Delamere 701
58788 Denbigh 701
58430 Denhoff 701
58733 Des Lacs 701
58301 Devils Lake 701
58431 Dickey 701
58601 Dickinson 701
58602 Dickinson 701
58625 Dodge 701
58734 Donnybrook 701
58735 Douglas 701
58421 Dover 701
58327 Doyon 701
58736 Drake 701
58225 Drayton 701
58249 Dresden 701
58532 Driscoll 701
58626 Dunn Center 701
58760 Dunning 701
58329 Dunseith 701
58059 Durbin 701
58075 Dwight 701
58631 Eagles Nest 701
58481 Eckelson 701
58760 Eckman 701
58433 Edgeley 701
58227 Edinburg 701
58330 Edmore 701
58476 Edmunds 701
58331 Egeland 701
58401 Eldridge 701
58533 Elgin 701
58436 Ellendale 701

58054 Elliott 701
58079 Embden 701
58228 Emerado 701
58540 Emmet 701
58422 Emrick 701
58027 Enderlin 701
58033 Englevale 701
58843 Epping 701
58029 Erie 701
58332 Esmond 701
58229 Fairdale 701
58627 Fairfield 701
58030 Fairmount 701
58577 Falkirk 701
58535 Fallon 701
58102 Fargo 701
58103 Fargo 701
58104 Fargo 701
58105 Fargo 701
58106 Fargo 701
58107 Fargo 701
58108 Fargo 701
58109 Fargo 701
58121 Fargo 701
58122 Fargo 701
58123 Fargo 701
58124 Fargo 701
58125 Fargo 701
58126 Fargo 701
58438 Fessenden 701
58332 Fillmore 701
58031 Fingal 701
58230 Finley 701
58535 Flasher 701
58737 Flaxton 701
58348 Flora 701
58366 Fonda 701
58439 Forbes 701
58231 Fordville 701
58233 Forest River 701
58032 Forman 701
58530 Fort Clark 701
58033 Fort Ransom 701
58554 Fort Rice 701
58335 Fort Totten 701
58538 Fort Yates 701
58844 Fortuna 701
58718 Foxholm 701
58492 Frazier 701
58535 Freda 701
58564 Freda 701
58440 Fredonia 701
58401 Fried 701
58104 Frontier 701
58622 Fryburg 701
58441 Fullerton 701
58442 Gackle 701
58075 Galchutt 701
58035 Galesburg 701
58227 Gardar 701
58036 Gardner 701
58540 Garrison 701
58382 Garske 701
58653 Gascoyne 701

58053 Geneseo 701
58235 Gilby 701
58630 Gladstone 701
58236 Glasston 701
58631 Glen Ullin 701
58740 Glenburn 701
58443 Glenfield 701
58474 Glover 701
58541 Golden Valley 701
58541 Goldenvalley 701
58496 Goldwin 701
58632 Golva 701
58444 Goodrich 701
58627 Gorham 701
58445 Grace City 701
58237 Grafton 701
58201 Grand Forks 701
58202 Grand Forks 701
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 56667 O'Brien 218
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 56741 Oak Island 218
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 56276 Odessa 320
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 56569 Ogema 218
 56358 Ogilvie 320
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56742 Oklee 218
 56646 Olga 218
 56277 Olivia 320
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 56484 Onigum 218
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 56162 Ormsby 507
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 56470 Park Rapids 218
 56475 Parker 320
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 55768 Parkville 218
 55704 Partridge 320
 56362 Paynesville 320
 56363 Pease 320
 56572 Pelican Rapids 218
 56078 Pemberton 507
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 56472 Pequot Lakes 218
 56573 Perham 218
 56574 Perley 218
 55962 Peterson 507
 55987 Pickwick 507
 56364 Pierz 320
 55732 Pike 218
 56633 Pike Bay 218
 56473 Pillager 218
 55923 Pilot Mound 507
 55063 Pine City 320
 55963 Pine Island 507

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56644 Pine Lake 218	56577 Richwood 218
56456 Pine River 218	56540 Rindal 218
56474 Pine River 218	56455 Riverton 218
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55128 Pine Springs 651	56578 Rochert 218
56751 Pinecreek 218	55901 Rochester 507
55705 Pineville 218	55902 Rochester 507
56676 Pinewood 218	55903 Rochester 507
56164 Pipestone 507	55904 Rochester 507
56623 Pitt 218	55905 Rochester 507
55964 Plainview 507	55906 Rochester 507
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55976 Pleasant Grove 507	55373 Rockford 763
56748 Plummer 218	55577 Rockford 763
55441 Plymouth 763	56369 Rockville 320
55442 Plymouth 763	55374 Rogers 763
55446 Plymouth 763	56549 Rollag 218
55447 Plymouth 763	55969 Rollingstone 507
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56575 Ponsford 218	56682 Roosevelt 218
56474 Ponto Lake 218	56371 Roscoe 320
56479 Poplar 218	55970 Rose Creek 507
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55932 Potsdam 507	55126 Roseville 651
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55060 Pratt 507	56751 Ross 218
55934 Predmore 507	56579 Rothsay 218
55965 Preston 507	56167 Round Lake 507
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56281 Prinsburg 320	55746 Ruby Junction 218
55372 Prior Lake 952	56464 Runeberg 218
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56667 Puposky 218	55069 Rush City 320
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56630 Quiring 218	56169 Russell 507
55967 Racine 507	56170 Ruthton 507
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56668 Ranier 218	55418 Saint Anthony 612
56669 Ray 218	55421 Saint Anthony 763
56282 Raymond 320	55418 Saint Anthony Village 612
56165 Reading 507	55421 Saint Anthony Village 763
55968 Reads Landing 651	55320 Saint Augusta 320
56750 Red Lake Falls 218	55353 Saint Augusta 320
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56283 Redwood Falls 507	56080 Saint Clair 507
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55919 Reno 507	56302 Saint Cloud 320
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55080 Stanford 320
55018 Stanton 507
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Appendix F

North Dakota Century Code/Administrative Rules

NORTH DAKOTA CENTURY CODE 23-01
CHAPTER 23-01.2
TRAUMA AND EMERGENCY MEDICAL SYSTEM

23-01.2-01. Trauma system established - Duties of health council. The health council, in conjunction with the state department of health, may establish and maintain a comprehensive trauma system for the state. The trauma system may include standards for the following components:

1. A system plan.
2. Pre-hospital emergency medical services.
3. Hospitals, for which the standards must include:
 - a. Standards for designation, redesignation, and dedesignation of trauma centers.
 - b. Standards for evaluation and quality improvement programs for designated trauma centers. The standards must require each trauma center to collect quality improvement data and to provide specified portions to the department for use in state and regional trauma quality improvement programs.
 - c. Qualifications for trauma center personnel.
4. A trauma registry. Data in the trauma registry is not subject to subpoena or discovery or introduction into evidence in any civil action. Designated trauma centers must participate in the trauma registry. A hospital not designated as a trauma center must provide to the registry a minimum set of data elements for all trauma patients as determined by the health council.
5. A trauma quality improvement program to monitor the performance of the trauma system. The proceedings and records of the program are not subject to subpoena or discovery or introduction into evidence in any civil action arising out of any matter that is the subject of consideration by the program.

23-01.2-02. Physician immunity for voluntary medical direction. A physician is immune from liability while providing voluntary medical direction.

Article 33-38

State Trauma System

Chapter
33-38-01 Trauma System Regulation

Chapter 33-38-01

Trauma System Regulation

Section
33-38-01-01 Definitions
33-38-01-02 Trauma System
33-38-01-03 Activation of Trauma Codes for Major Trauma Patients
33-38-01-04 Emergency Medical Services
33-38-01-05 Local Emergency Medical Services Transport Plans
33-38-01-06 Trauma Center Designation
33-38-01-07 Trauma Center Revocation of Designation
33-38-01-08 State Trauma Registry
33-38-01-09 Quality Improvement Process
33-38-01-10 State Trauma Committee Membership
33-38-01-11 Trauma Regions - Regional Trauma Committee
33-38-01-12 Trauma Center Name Restriction
33-38-01-13 Level IV Trauma Center Designation Standards
33-38-01-14 Level V Trauma Center Designation Standards

33-38-01-01. Definitions. Words defined in North Dakota Century Code chapter 23-01.2 have the same meaning in this chapter. As used in this chapter:

1. “Advanced prehospital trauma life support” means the most current edition of the course as developed by the national association of emergency medical technicians in cooperation with the American college of surgeons – committee on trauma, or its equivalent as, determined by the department.
2. “Advanced trauma life support,” means the most current edition of the course as developed by the American college of surgeons – committee on trauma, or its equivalent, as determined by the department.
3. “Department” means the state department of health.
4. “Emergency medical services” means the system of personnel who provide medical care from the time of injury to hospital admission.
5. “Local emergency medical services transport plans” means plans developed by emergency medical services, medical directors, and hospital officials, which establish the most efficient method to transport trauma patients.

6. "Major trauma patient" means any patient that fits the trauma triage algorithm adopted by American college of surgeons, committee on trauma, Resources for Optimal Care of the Injured Patient: 1999 page 14.
7. "Provisional designation" means a state process of designating a facility as a level I, II, or III trauma center based on American college of surgeons standards for a period of up to twenty-four months, until an American college of surgeons' verification visit is completed.
8. "Trauma" means tissue damage caused by the transfer of thermal, mechanical, electrical, or chemical energy, or by the absence of heat or oxygen.
9. "Trauma center" means a facility that has made a commitment to serve the trauma patient, has met the standards of the trauma system, and has obtained designation as a trauma center.
10. "Trauma code" includes the activation and assembly of the trauma team to provide care to the major trauma patient.
11. "Trauma nursing core course" means the most current edition of the course as developed by the emergency nurses association, or its equivalent, as determined by the department.
12. "Trauma quality improvement program" means a system of evaluating the prehospital, trauma center, and rehabilitative care of trauma patients.
13. "Trauma registry" includes the collection and analysis of trauma data from the trauma system.
14. "Trauma team" includes a group of health care professionals organized to provide care to the trauma patient.

History: Effective July 1, 1997; amended effective June 1, 2001.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-02. Trauma system. A statewide trauma system shall be adopted by the state health council.

The trauma system shall consist of the following:

1. Standardized definition of major trauma patient.
2. Trauma code activation protocols.
3. Local emergency medical services transport plans.
4. Trauma center designation process.
5. Revocation of trauma center designation process.
6. Statewide trauma registry.
7. Quality improvement process.
8. State trauma committee.
9. Four regional trauma committees.

History: Effective July 1, 1997.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-03. Activation of trauma codes for major trauma patients. Emergency medical services and trauma centers shall assess patients and activate a trauma code if the patient meets the major trauma definition.

History: Effective July 1, 1997.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-04. Emergency medical services. All emergency medical services licensed or certified by the department shall establish each of the following:

1. Trauma code activation protocols.
2. Trauma patient care protocols that have been reviewed and approved by a medical director.
3. Local emergency medical services transport plans.

History: Effective July 1, 1997.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-05. Local emergency medical services transport plans. Emergency medical services shall develop local emergency medical services transport plans for the transport of major trauma patients by appropriate means to the nearest designated trauma center. Emergency medical services may bypass the nearest designated trauma center for a higher-level trauma center provided that it does not result in an additional thirty minutes or more of transport time. If there are multiple trauma centers in the community, the major trauma patient meeting the criteria in steps one or two of the field triage decision scheme, provided by the American college of surgeons Resources for Optimal Care of the Injured Patient: 1999, page 14, should be taken to the trauma center with the highest level of designation. The plans are subject to approval by all the participating health care entities named in the plan, then submitted for review and approval to the regional trauma committee. Following approval, the local emergency medical services transport plans must be filed with the department and distributed to participating dispatch centers.

After activation of a trauma code, a dispatch center shall notify the necessary facilities and the emergency medical service unit shall transport the patient according to its local emergency medical services transport plans.

History: Effective July 1, 1997; amended effective June 1, 2001.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-06. Trauma center designation.

1. Five levels of hospital designation must be established.
2. Hospitals applying for level I, level II or level III designation shall present evidence of having current trauma center verification from the American college of surgeons. The department shall issue designation with an expiration date consistent with the American college of surgeons' verification expiration date.
3. Hospitals applying for level IV and V trauma center designation must submit an application to the department. Once the application is approved by the department, an onsite verification visit shall be conducted by the department or its designee. The verification team shall compile a report. The application and report will be reviewed by the state trauma committee. If approved, the department shall issue the designation to the facility.
4. Hospitals without trauma center designation applying for a provisional designation must submit an application to the department. Once the application is approved by the department an onsite visit shall be conducted by a team designated by the state trauma committee. The team shall compile a report. The application and report will be reviewed by the state trauma committee. If approved, the department shall issue a provisional designation for a maximum of twenty-four

months. During these twenty-four months the facility must complete an American college of surgeons verification visit.

5. The health council, in establishing a comprehensive trauma system, may designate an out-of-state hospital within 50 miles of any border of this state.

History: Effective July 1, 1997; amended effective June 1, 2001.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-07. Trauma center revocation of designation. The department may revoke designation of a trauma center if evidence exists that the facility does not meet the required trauma center standards. The department or its designee may inspect any trauma center or applicant for trauma center designation at any time for compliance with the standards. Designation must be revoked if a facility denies or refuses inspection.

A trauma center that fails to maintain the standards, or voluntarily relinquishes their designation, may submit a plan for correction. Once the plan is approved by the department, the trauma center may be reinstated as a designated trauma center. Failure to follow an approved plan of correction results in revocation of the trauma center's designation.

History: Effective July 1, 1997.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-08. State trauma registry. The department shall establish a trauma registry including the minimum data elements. All hospitals must report the minimum data elements to the department for patients who have an international classification of diseases, ninth revision (ICD-9) code of 800-959.9 and one of the following criteria:

1. Trauma deaths.
2. Hospital admission greater than forty-eight hours.
3. Patients admitted that go to the intensive care unit or operating room.
4. Patients transferred into or out of the hospital.

Reporting may occur electronically by downloading computer files or through completion of the North Dakota transfer form or other form approved by the department. Information may not be released from the state trauma registry except as permitted by North Dakota century code sections 23-01-15 and 23-01-02.1.

History: Effective July 1, 1997.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-09. Quality improvement process. A quality improvement process shall be established by the state trauma committee. The process must include evaluation criteria that will provide guidelines for acceptable standards of care.

The regional committees shall evaluate the trauma system within their region based upon the evaluation criteria. The regional trauma committee shall make recommendations to emergency medical services and trauma centers in the development of plans to improve the system.

History: Effective July 1, 1997.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-10. State trauma committee membership. The state trauma committee membership must include the following:

1. One member from the North Dakota committee on trauma - American college of surgeons, appointed by the committee.
2. One member from the American college of emergency physicians - North Dakota chapter, appointed by the chapter.
3. One member from the North Dakota health care association, appointed by the association.
4. One member from the North Dakota medical association, appointed by the association.
5. One member from the North Dakota EMS association - basic life support, appointed by the association.
6. One member from the North Dakota EMS association - advanced life support appointed by the association.
7. One member from the North Dakota nurses association, appointed by the association.
8. One member on the faculty of the University of North Dakota School of Medicine and Health Sciences, appointed by the dean of the medical school.
9. One member from the North Dakota emergency nurses association, appointed by the association.
10. One member from Indian health service, appointed by the Aberdeen area director of the service.
11. One member from accredited trauma rehabilitation facilities, appointed by the state health council.
12. One member who is a hospital trauma coordinator, appointed by the trauma coordinators committee.
13. The medical director of the division of emergency health services of the department.
14. The regional trauma committee chair from each region, if not representing an association.
15. Four additional members, appointed by the state health council.

History: Effective July 1, 1997; amended effective June 1, 2001.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-11. Trauma regions - regional trauma committee. The state trauma committee shall establish four trauma regions. The regions must be designated northwest, northeast, southeast, and southwest. An emergency medical service or trauma center that is located within fifteen miles [24.14 kilometers] of a regional boundary may request to function within another region. This request shall be reviewed and is subject to approval by the state trauma committee.

The state trauma committee shall appoint a regional trauma committee to serve each trauma region. The regional committees may consist of members representing the following:

1. North Dakota committee on trauma - American college of surgeons.
2. North Dakota chapter of American college of emergency physicians.
3. Physician of a level IV trauma center.
4. Level IV or V hospital representative.
5. Hospital trauma coordinator.
6. Accredited rehabilitation facility representative.

7. Indian health service or tribal government representative.
8. North Dakota EMS association.
9. Other members, chosen by the state trauma committee.

History: Effective July 1, 1997; amended effective June 1, 2001.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-12. Trauma center name restriction. No health care facility in North Dakota may use the title “trauma center” or otherwise hold itself out as a trauma center unless the facility is designated by the department as a trauma center.

History: Effective July 1, 1997.

General authority: NDCC 23-01.2-01

Law implemented: NDCC 23-01.2-01

33-38-01-13. Level IV trauma center designation standards. The following standards shall be met to achieve level IV designation:

1. Trauma team activation plan.
2. Trauma team leader must be a current advanced trauma life support certified physician, who is on call and available within twenty minutes and has experience in resuscitation and care of trauma patients.
3. Transfer agreements as the transferring facility to a level II trauma center for major trauma care, burn care, rehabilitation service for long term care, acute spinal cord and head injury management, and pediatric trauma management.
4. Equipment for resuscitation and life support of all ages must include:
 - a. Airway control and ventilation equipment, including laryngoscopes and endotracheal tubes of all sizes, including pediatrics, bag mask resuscitator, pocket masks and oxygen.
 - b. Pulse oximetry.
 - c. End tidal CO₂ determination.
 - d. Suction devices.
 - e. Electrocardiograph, oscilloscope, and defibrillator.
 - f. Standard intravenous fluids and administration devices, including large bore intravenous catheters.
 - g. Sterile surgical sets for airway control, cricothyrotomy, vascular access and chest decompression.
 - h. Gastric decompression.
 - i. Drugs necessary for emergency care.
 - j. Communication with emergency medical services vehicles.
 - k. Spinal stabilization equipment.
 - l. Thermal control equipment for patients.
 - m. Broselow tape.
5. Quality improvement programs to include:
 - a. Focused audit of selected filters.
 - b. Trauma registry in accordance with 33-38-01-08.
 - c. Focused audit for all trauma deaths.
 - d. Morbidity and mortality review.

- e. Medical nursing audit, utilization review and tissue review.
- 6. Trauma transfer protocol to include:
 - a. Triage decision scheme.
 - b. Trauma transport plan.

History: Effective June 1, 2001

General Authority: NDCC 23-01.2-01

Law Implemented: NDCC 23-01.2-01

33-38-01-14. Level V trauma designation standards. The following standards shall be met to achieve level V designation:

1. Trauma team activation plan.
2. Trauma team leader must be on call and available within twenty minutes, who has experience in resuscitation and care of trauma patients. The trauma team leader must be one of the following:
 - a. A physician who is current in advanced trauma life support.
 - b. A physician assistant, whose supervising physician, has delegated to the physician assistant the authority to provide care to trauma patients and who has taken the trauma nursing core course, and is current in advanced pre-hospital trauma life support and advanced trauma life support.
 - c. A nurse practitioner whose scope of practice entails the care of trauma patients, has taken the trauma nursing core course, is current in advanced pre-hospital trauma life support and advanced trauma life support, and whose scope of practice is approved by the North Dakota board of nursing.
3. Transfer agreements as the transferring facility to a level II trauma center for major trauma care, burn care, rehabilitation service for long term care, acute spinal cord and head injury management, and pediatric trauma management.
4. Equipment for resuscitation and life support of all ages must include:
 - a. Airway control and ventilation equipment, including laryngoscopes and endotracheal tubes of all sizes, including pediatrics, bag mask resuscitator, pocket masks and oxygen.
 - b. Pulse oximetry.
 - c. End tidal CO₂ determination.
 - d. Suction devices.
 - e. Electrocardiograph, oscilloscope, and defibrillator.
 - f. Standard intravenous fluids and administration devices, including large bore intravenous catheters.
 - g. Sterile surgical sets for airway control, cricothyrotomy, vascular access and chest decompression.
 - h. Gastric decompression.
 - i. Drugs necessary for emergency care.
 - j. Communication with emergency medical services vehicles.
 - k. Spinal stabilization equipment.
 - l. Thermal control equipment for patients.
 - m. Broselow tape.
5. Quality improvement programs to include:

- a. Focused audit of selected filters.
- b. Trauma registry in accordance with 33-38-01-08.
- c. Focused audit for all trauma deaths.
- d. Morbidity and mortality review.
- e. Medical nursing audit, utilization review and tissue review.
- f. Current advanced trauma life support certified physician review of all trauma codes managed by a physician assistant or advanced nurse practitioner within forty-eight hours. This may be either the consulting or transfer-receiving physician.

6. Trauma transfer protocol to include:

- a. Triage decision scheme.
- b. Trauma transport plan.
- c. Call schedule for physician, if available.
- d. Immediate telephone contact with a level II trauma center.

History: Effective June 1, 2001

General Authority: NDCC 23-01.2-01

Law Implemented: NDCC 23-01.2-01

Appendix G

Temperature Conversion Chart

Temperature Conversion Chart

Fahrenheit	Celsius	Fahrenheit	Celsius	Fahrenheit	Celsius
89	31.66	93.5	34.16	97.9	36.61
89.1	31.72	93.6	34.22	98	36.66
89.2	31.77	93.7	34.27	98.1	36.72
89.3	31.83	93.8	34.33	98.2	36.77
89.4	31.88	93.9	34.38	98.3	36.83
89.5	31.94	94	34.44	98.4	36.88
89.6	32	94.1	34.5	98.5	36.94
89.7	32.05	94.2	34.55	98.6	37
89.8	32.11	94.3	34.61	98.7	37.05
89.9	32.16	94.4	34.66	98.8	37.11
90	32.22	94.5	34.72	98.9	37.16
90.1	32.27	94.6	34.77	99	37.22
90.2	32.33	94.7	34.83	99.1	37.27
90.3	32.38	94.8	34.88	99.2	37.33
90.4	32.44	94.9	34.94	99.3	37.38
90.5	32.5	95	35	99.4	37.44
90.6	32.55	95.1	35.05	99.5	37.5
90.7	32.61	95.2	35.11	99.6	37.55
90.8	32.66	95.3	35.16	99.7	37.61
90.9	32.72	95.4	35.22	99.8	37.66
91	32.77	95.5	35.27	99.9	37.72
91.1	32.83	95.6	35.33	100	37.77
91.2	32.88	95.7	35.38	100.1	37.83
91.3	32.94	95.8	35.44	100.2	37.88
91.4	33	95.9	35.5	100.3	37.94
91.5	33.05	96	35.55	100.4	38
91.6	33.11	96.1	35.61	100.5	38.05
91.7	33.16	96.2	35.66	100.6	38.11
91.8	33.22	96.3	35.72	100.7	38.16
91.9	33.27	96.4	35.77	100.8	38.22
92	33.33	96.5	35.83	100.9	38.27
92.1	33.38	96.6	35.88	101	38.33
92.2	33.44	96.7	35.94	101.1	38.38
92.3	33.5	96.8	36	101.2	38.44
92.4	33.55	96.9	36.05	101.3	38.5
92.5	33.61	97	36.11	101.4	38.55
92.6	33.66	97.1	36.16	101.5	38.61
92.7	33.72	97.2	36.22	101.6	38.66
92.8	33.77	97.3	36.27	101.7	38.72
92.9	33.83	97.4	36.33	101.8	38.77
93	33.88	97.5	36.38	101.9	38.83
93.1	33.94	97.6	36.44	102	38.88
93.2	34	97.7	36.5	102.1	38.94
93.3	34.05	97.8	36.55	102.2	39
93.4	34.11				

Appendix H

Weight Conversion Chart

Weight Conversion Chart

lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg
1	0.5	61	27.5	121	55	181	82	241	109.5	301	136.5
2	1	62	28	122	55.5	182	82.5	242	110	302	137
3	1.5	63	28.5	123	56	183	83	243	110	303	137.5
4	2	64	29	124	56.5	184	83.5	244	110.5	304	138
5	2.5	65	29.5	125	56.5	185	84	245	111	305	138.5
6	2.5	66	30	126	57	186	84.5	246	111.5	306	139
7	3	67	30.5	127	57.5	187	85	247	112	307	139.5
8	3.5	68	31	128	58	188	85	248	112.5	308	139.5
9	4	69	31.5	129	58.5	189	85.5	249	113	309	140
10	4.5	70	32	130	59	190	86	250	113.5	310	140.5
11	5	71	32	131	59.5	191	86.5	251	114	311	141
12	5.5	72	32.5	132	60	192	87	252	114.5	312	141.5
13	6	73	33	133	60.5	193	87.5	253	115	313	142
14	6.5	74	33.5	134	61	194	88	254	115	314	142.5
15	7	75	34	135	61.5	195	88.5	255	115.5	315	143
16	7.5	76	34.5	136	61.5	196	89	256	116	316	143.5
17	7.5	77	35	137	62	197	89.5	257	116.5	317	144
18	8	78	35.5	138	62.5	198	90	258	117	318	144.5
19	8.5	79	36	139	63	199	90.5	259	117.5	319	144.5
20	9	80	36.5	140	63.5	200	90.5	260	118	320	145
21	9.5	81	36.5	141	64	201	91	261	118.5	321	145.5
22	10	82	37	142	64.5	202	91.5	262	119	322	146
23	10.5	83	37.5	143	65	203	92	263	119.5	323	146.5
24	11	84	38	144	65.5	204	92.5	264	120	324	147
25	11.5	85	38.5	145	66	205	93	265	120	325	147.5
26	12	86	39	146	66	206	93.5	266	120.5	326	148
27	12.5	87	39.5	147	66.5	207	94	267	121	327	148.5
28	12.5	88	40	148	67	208	94.5	268	121.5	328	149
29	13	89	40.5	149	67.5	209	95	269	122	329	149.5
30	13.5	90	41	150	68	210	95.5	270	122.5	330	149.5
31	14	91	41.5	151	68.5	211	95.5	271	123	331	150
32	14.5	92	41.5	152	69	212	96	272	123.5	332	150.5
33	15	93	42	153	69.5	213	96.5	273	124	333	151
34	15.5	94	42.5	154	70	214	97	274	124.5	334	151.5
35	16	95	43	155	70.5	215	97.5	275	125	335	152
36	16.5	96	43.5	156	71	216	98	276	125	336	152.5
37	17	97	44	157	71	217	98.5	277	125.5	337	153
38	17	98	44.5	158	71.5	218	99	278	126	338	153.5
39	17.5	99	45	159	72	219	99.5	279	126.5	339	154
40	18	100	45.5	160	72.5	220	100	280	127	340	154.5
41	18.5	101	46	161	73	221	100.5	281	127.5	341	154.5
42	19	102	46.5	162	73.5	222	100.5	282	128	342	155
43	19.5	103	46.5	163	74	223	101	283	128.5	343	155.5
44	20	104	47	164	74.5	224	101.5	284	129	344	156
45	20.5	105	47.5	165	75	225	102	285	129.5	345	156.5

lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg	lbs	kg
46	21	106	48	166	75.5	226	102.5	286	130	346	157
47	21.5	107	48.5	167	76	227	103	287	130	347	157.5
48	22	108	49	168	76	228	103.5	288	130.5	348	158
49	22	109	49.5	169	76.5	229	104	289	131	349	158.5
50	22.5	110	50	170	77	230	104.5	290	131.5	350	159
51	23	111	50.5	171	77.5	231	105	291	132	351	159.5
52	23.5	112	51	172	78	232	105.5	292	132.5	352	160
53	24	113	51.5	173	78.5	233	105.5	293	133	353	160.5
54	24.5	114	51.5	174	79	234	106	294	133.5	354	161
55	25	115	52	175	79.5	235	106.5	295	134	355	161.5
56	25.5	116	52.5	176	80	236	107	296	134.5	356	162
57	26	117	53	177	80.5	237	107.5	297	134.5	357	162.5
58	26.5	118	53.5	178	80.5	238	108	298	135	358	163
59	27	119	54	179	81	239	108.5	299	135.5	359	163.5
60	27	120	54.5	180	81.5	240	109	300	136	360	164

Appendix I

Procedure Easy Codes

NTDB	Description	ICD Code	
CPR	CPR	99.60	Cardiopulmonary Resuscitation
"	"	99.63	Closed Chest Massage
"	"	37.91	Open Cardiac Massage
"	"	93.93	Mouth to Mouth Resuscitation
CHEST	Chest decompression	34.09	Needle Decompression (Intercostal Stab)
MAST	MAST	93.58	
FLUIDS	Intravenous fluids	99.99	
STATE	Description	ICD Code	
ABDPELCT	Abdominal/Pelvis CT	88.01	Abdominal CT, Abdominal & Pelvis CT
"	"	88.02	Other Abdominal Tomography
"	"	88.38	Other CT (Pelvis)
B.BOARD	Backboard	93.42	This is the code for Other Spinal Traction
"	"	93.59	Other immobilization (strapping)
BURN	Burn Care	93.57	Dressing
"	"	86.28	Nonincisional Debridement Burn, Wound or Infection
"	"	86.22	Incisional Debridement Burn, Wound or Infection
"	"	86.09	Escarotomy
"	"	86.65	Porcine, Pigskin Graft
"	"	86.69	Skin Graft, Partial or Split Thickness
"	"	86.60	Free (autogenous) Graft
"	"	86.63	Full Thickness Graft
"	"	86.65	Heterograft
"	"	86.66	Homograft
"	"	86.70	Island Flap Graft
"	"	86.70	Pedicle Flap Graft
"	"	86.71	Delayed
"	"	86.75	Revision
CARDIO	Cardioversion/Defibrillation	99.61	Atrial
"	"	99.62	External, Defibrillation
CAST	Cast of extremity	93.53	Immobilization,
"	"	93.54	Plaster or Tray Splint, Musculoskeletal splinting
"	"	79.00	Fracture Reduction with Cast, Splint
"	"	79.70	Cast or Splint for Dislocation of Joint
"	"	93.51	Plaster Jacket
C.COLLAR	Cervical Collar	93.52	C-Collar, Molded and Minerva
CHEST	Chest Tube	34.04	
CHESTCT	Chest CT	87.41	CT of Thorax
"	"	87.42	Other Tomography of Thorax
CLOSED	Closed Reduction (Fx)	21.71	Closed Reduction of Nasal Fracture
"	"	76.70	Reduction of Facial Fx not otherwise Specified
"	"	76.71	Closed Reduction of Malar and Zygomatic Fracture
"	"	76.73	Closed Reduction of Maxillary Fracture
"	"	76.75	Closed Reduction of Mandibular Fracture

STATE	Description	ICD Code	
"	"	76.78	Other Closed Reduction of Facial Fracture
"	"	76.93	Closed Reduction of Temporomandibular Dislocation
"	"	31.64	Closed Reduction Larynx
"	Closed Reduction (Dislocation)	79.70	Closed Reduction Unspecified Site
"	"	79.71	Closed Reduction Shoulder
"	"	79.72	Closed Reduction Elbow
"	"	79.73	Closed Reduction Wrist
"	"	79.74	Closed Reduction Hand or Finger
"	"	79.75	Closed Reduction Hip
"	"	79.76	Closed Reduction Knee
"	"	79.77	Closed Reduction Ankle
"	"	79.78	Closed Reduction Foot or Toes
"	"	79.79	Closed Reduction Other Specified Site
"	Closed Reduction (Fx)	79.00	Closed Reduction Fx Unspecified Site
"	"	79.01	Closed Reduction Humerus
"	"	79.11	Closed Reduction Humerus with Internal Fixation
"	"	79.02	Closed Reduction Ulna, Radius or Arm
"	"	79.12	Closed Reduction Ulna, Radius or Arm with Internal Fixation
"	"	79.03	Closed Reduction Carpal, Metacarpal or Hand Not otherwise Specified
"	"	79.13	Closed Reduction Carpal, Metacarpal or Hand not Otherwise Specified with Internal Fixation
"	"	79.04	Closed Reduction Phalanges of Hand
"	"	79.14	Closed Reduction Phalanges of Hand with Internal Fixation
"	"	79.05	Closed Reduction Femur
"	"	79.15	Closed Reduction Femur with Internal Fixation
"	"	79.06	Closed Reduction Fibula, Tibia or Leg not Otherwise Specified
"	"	79.16	Closed Reduction Fibula, Tibia or Leg not Otherwise Specified with Internal Fixation
"	"	79.07	Closed Reduction Tarsal, Metatarsal or Foot not Otherwise Specified
"	"	79.17	Closed Reduction Tarsal, Metatarsal or Foot not Otherwise Specified with Internal Fixation
"	"	79.08	Closed Reduction Phalanges of Foot
"	"	79.18	Closed Reduction Phalanges of Foot with Internal Fixation
"	"	79.09	Closed Reduction of Other Specified Bone
"	"	79.19	Closed Reduction of Other Specified Bone with Internal Fixation
"	"	02.02	Closed Reduction of Skull
"	"	03.53	Closed Reduction of Vertebra
CO2MON	CO2 Monitor	99.99	

STATE	Description	ICD Code	
COFAC	Coagulation Factor Administration	99.06	Transfusion Coagulation Factors
"	"	99.05	Transfusion of Platelets
"	"	99.09	Transfusion of Other Substance
CRIC	Cricothyrotomy	31.1	For Assistance with Breathing
CT	Other CT Not listed	88.38	
EKG	Electrocardiogram (aka: ECG)	89.52	12 or More Leads
FFP	Fresh Frozen Plasma	99.07	Transfusion of Other Serum, Plasma
FOLEY	Indwelling Foley Catheter	57.94	
HEADCT	Head CT	87.03	Head
"	"	87.02	Brain or Skull
"	"	87.04	Other tomography of Head
"	"	88.38	Other CT (facial)
INTUB	Intubation	96.01	Insertion of nasopharyngeal airway
"	"	96.02	Insertion of oropharyngeal airway
"	"	96.03	Insertion of esophageal obturator airway
"	"	96.04	Insertion of endotracheal tube
"	"	96.05	Other intubation of respiratory tract
OR	All OR procedures not formally specified	99.99	
OTHER	Unspecified Other Procedure	99.99	
OXY	Oxygen Administration	93.96	
PLATE	Administration of Platelets	99.05	Also Under Coagulation factors
RBC	Administration of Packed Red Blood	99.04	
SPLINT	Splint	93.54	Plaster or Tray Splint, Musculoskeletal splinting Also Under Cast
SU	Suture (Lacerations)	54.63	Abdominal Wall
"	(NOT an all inclusive list)	54.61	Secondary (Abdominal Wall)
"	"	28.7	Adenoid Fossa
"	"	07.44	Adrenal (gland)
"	"	39.52	Aneurysm (cerebral) (peripheral)
"	"	49.71	Anus
"	"	83.64	Other Suture of Tendon
"	"	39.53	Arteriovenous Fistula
"	"	39.30	Suture Unspecified Blood Vessel
"	"	39.31	Artery (Including Aorta)
"	"	39.32	Vein
		51.71	Common Bile Duct
"	"	51.79	Bile Duct NOS (hepatic duct)
"	"	57.81	Bladder
"	"	85.81	Breast
"	"	33.41	Bronchus
"	"	33.43	Lung
"	"	83.99	Bursa
"	"	82.99	Hand (Operative)

STATE	Description	ICD Code	
"	"	09.73	Canaliculus
"	"	46.75	Cecum, Colon (large intestine)
"	"	02.11	Cerebral Meninges (dura mater)
"	"	67.61	Cervix (traumatic laceration)
"	"	34.71	Chest wall
"	"	27.61	Palate
"	"	10.6	Conjunctiva
"	"	11.51	Cornea, scleral
"	"	11.53	Conjunctival flap
"	"	34.82	Diaphragm
"	"	46.71	Duodenum
"	"	03.59	Spinal
"	"	18.4	Ear, External
"	"	63.51	Epididymis, Spermatic Cord
"	"	63.81	Vas Deferens
"	"	42.82	Esophagus
"	"	16.89	Eyeball
"	"	08.81	Eyebrow, Eyelid
"	"	51.91	Gallbladder
"	"	83.65	Fascia or Muscle
"	"	82.46	Fascia or Muscle of Hand
"	"	05.39	Sympathetic Nerve or Ganglion
"	"	24.32	Gingiva (gum)
"	"	37.49	Heart, Pericardium
"	"	46.73	Ileum, jejunum (small intestine, except duodenum)
"	"	81.96	Joint Capsule
"	"	81.93	Capsule or Ligament of Upper Extremity
"	"	81.94	Capsule or Ligament of Ankle or Foot
"	"	81.95	Capsule or Ligament of other Lower Extremity
"	"	55.81	Kidney
"	"	54.64	Peritoneum, Omentum
"	"	31.61	Larynx
"	"	81.96	Ligament
"	"	54.73	Other repair of peritoneum (gastric ligament)
"	"	27.51	Lip
"	"	50.61	Liver
"	"	54.75	Mesentery
"	"	27.52	Mouth
"	"	15.7	Extraocular Muscle or Tendon
"	"	04.3	Nerve, cranial or peripheral
"	"	21.81	Nose
"	"	52.95	Pancreas
"	"	71.71	Perineum, Pelvic Floor
"	"	64.41	Penis, Scrotum Skin
"	"	29.51	Pharynx
"	"	34.93	Pleura
"	"	48.71	Rectum
"	"	14.59	Retina (reattachment)

STATE	Description	ICD Code	
"	"	86.59	Skin and Subcutaneous closure Other sites (scalp) (adhesives, sutures, staples)
"	"	12.81	Sclera
"	"	41.95	Spleen
"	"	44.61	Stomach
"	"	83.61	Tendon Sheath
"	"	62.61	Testis
"	"	07.93	Thymus
"	"	06.93	Thyroid Gland
"	"	25.51	Tongue
"	"	31.71	Trachea
"	"	44.42	Duodenum
"	"	56.82	Ureter
"	"	58.41	Urethra
"	"	69.41	Uterus
"	"	70.71	Vagina
TET	Tetanus	99.38	
TRAC	Traction	93.41	Spinal Traction (tongs or halo)
"	"	93.42	Other Spinal Traction
"	"	93.43	Intermittent Skeletal Traction
"	"	93.44	Other Skeletal Traction
"	"	93.45	Thomas Splint Traction
"	"	93.46	Other Skin Traction of Limbs (tapes, boots, Buck's or Gallows)
TRACH	Tracheostomy	31.1	Temporary Tracheostomy
"	"	31.21	Mediastinal Tracheostomy
"	"	31.29	Other Permanent Tracheostomy
VENT	Mechanical Ventilation	96.70	Continuous Mechanical Ventilation of Unspecified duration
"	"	96.71	Continuous Mechanical Ventilation for less than 96 consecutive hours
"	"	96.72	Continuous Mechanical Ventilation for more than 96 consecutive hours
WARMFL	Warm Fluids Administered	99.99	
WARMPT	Warming of Patient	99.99	
XRAY	Other x-ray not specified	88.39	Other and Unspecified
"	(This IS NOT an all inclusive list)	87.05	Contrast dacryocystogram (tear duct)
"	"	87.06	Contrast Radiogram of Nasopharynx
"	"	87.09	Other Soft Tissue X-Ray of Face, Head and Neck (adenoid, larynx, salivary gland, thyroid region, nasolacrimal duct,nasopharynx)
"	"	87.11	Full-Mouth X-ray of Teeth
"	"	87.12	Other Dental X-ray (panorex, orthodontic Cephalogram, root canal x-rays)
"	"	87.13	Temporomandibular Contrast Arthrogram
"	"	87.14	Contrast Radiogram of Orbit
"	"	87.15	Contrast Radiogram of Sinus

STATE	Description	ICD Code	
"	"	87.16	Other X-ray of Facial Bones (frontal area, mandible, maxilla, nasal sinuses, nose, orbit, supraorbital area, symphysis menti, zygomaticomaxillary complex)
"	"	87.17	Other X-ray of Skull (Lateral, Sagittal, Tangential)
"	"	87.21	Contrast Myelogram (Head)
"	"	87.31	Endotracheal Bronchogram
"	"	87.32	Other Contrast Bronchogram
"	"	87.36	Xerography of Breast
"	"	87.37	Other Mammography
"	"	87.38	Sinogram of Chest Wall (fistulogram of chest wall)
"	"	87.39	Other Soft Tissue of Chest Wall
"	"	87.52	Intravenous Cholangiogram (examine bile ducts with IV contrast)
"	"	87.54	Other Cholangiogram (NOT percutaneous or intraoperative)
"	"	87.59	Other Biliary Tract X-ray (cholecystogram)
"	"	87.61	Barium Swallow
"	"	87.62	Upper GI Series
"	"	87.63	Small Bowel Series
"	"	87.64	Lower GI Series
"	"	87.65	Other X-ray of Intestine
"	"	87.66	Contrast Pancreatogram
"	"	87.69	Other Digestive Tract X-Ray
"	"	87.73	Intravenous Pyelogram
"	"	87.74	Retrograde Pyelogram
"	"	87.76	Retrograde Cystogram (exam bladder and urethra with contrast through Catheter into bladder)
"	"	87.77	Other Cystogram
"	"	87.79	Other X-ray of Urinary System (KUB)
"	"	87.81	X-ray Gravid Uterus
"	"	87.85	X-ray of Fallopian Tubes and Uterus
"	"	87.89	Other X-ray of Female Genital Organs
"	"	87.91	Contrast Seminal Vesiculogram
"	"	87.92	Other X-ray of Prostate and Seminal Vesiculogram
"	"	87.94	Contrast Vasogram
"	"	87.99	Other x-ray of male Genital Organs
"	"	88.03	Sinogram of Abdominal Wall (fistulogram of abdominal wall)
"	"	88.09	Other Soft Tissue of Abdominal Wall
"	"	88.11	Pelvic Opaque Dye Contrast Radiography
"	"	88.14	Retroperitoneal Fistulogram
"	"	88.16	Other retroperitoneal X-ray
"	"	88.19	Other X-ray of Abdomen (flat plate)

STATE	Description	ICD Code	
"	"	88.31	Skeletal Series (X-ray whole skeleton)
"	"	88.32	Contrast Arthrogram (NOT temporomandibular)
"	"	88.33	Other Skeletal x-ray
"	"	88.35	Other Soft Tissue X-ray of Upper Limb
"	"	88.37	Other Soft Tissue X-ray of Lower Limb
XRAYSPINE	X-ray of Spine (CS, TS, LS, SS)	87.22	CS
"	"	87.23	TS
"	"	87.24	LS & SS
"	"	87.29	Other x-ray of Spine NOS
XRAYCH	X-ray of Chest (Skeletal)	87.43	Rib, Sternum, and Clavicle
"	"	87.44	Routine chest x-ray, so described
"	"	87.39	Other Soft Tissue x-ray chest wall
"	"	87.49	Other CXR, NOS of Bronchus, Diaphragm, Heart, Lung, Mediastinum and Trachea
XRAYARM	X-ray of Arm (Skeletal)	88.21	Skeletal X-ray of Shoulder and Upper Arm
"	"	88.22	Skeletal X-ray of Elbow and Forearm
"	"	88.23	Skeletal X-ray of Wrist and Hand
"	"	88.24	Skeletal X-ray of Upper limb, Not otherwise specified
XRAYLEG	X-ray of Leg (Skeletal)	88.26	Skeletal X-ray of pelvis and hip
"	"	88.27	Skeletal X-ray of thigh, knee, and lower leg
"	"	88.28	Skeletal X-ray of ankle and foot
"	"	88.29	Skeletal X-ray of lower limb, Not otherwise specified
US	Ultrasound	88.71	US of Head & Neck
"	"	88.72	US of Heart (Echo, TEE)
"	"	88.73	US of Other Sites of Thorax (Aortic Arch, Breast & Lung)
"	"	88.74	US of Digestive System
"	"	88.75	US of Urinary System
"	"	88.76	US of Abdomen & Retroperitoneum (including FAST)
"	"	88.77	US of Peripheral Vascular System
"	"	88.78	US of Gravid Uterus
"	"	88.79	Other Diagnostic US (multiple sites, non-gravid uterus, total body)

Appendix J

Procedure Code Look Up

**PROCEDURE CODE
LOOK-UPS**

CODE	IMMOBILIZATION	CODE	ULTRASOUND
93.59	Spine Board	88.71	Diagnostic US Head & Neck
93.52	Application Neck Support (collar)	88.72	Diagnostic US of Heart (TEE, echo)
93.54	Application Splint (plaster or tray)	88.73	Diagnostic US of Thorax
93.58	Mast Pants	88.74	Diagnostic US of Digestive System
93.46	Other Skin Tract Limbs	88.75	Diagnostic US of Urinary System
93.45	Traction Splint (Hare, Thomas, Sager)	88.76	Diagnostic US of Abd & Retroperitoneum (FAST)
93.53	Cast (fiberglass, plastic, plaster)	88.77	Diagnostic US Peripheral Vascular System
	AIRWAY	88.78	Diagnostic US of Gravid Uterus
31.1	Cricothyroidotomy, Temporary Trach	88.79	Other Diagnostic US (multiple, total body)
96.01	Insert Nasopharyngeal Airway		MRI
96.02	Insert Oropharyngeal Airway	88.91	MRI of Brain & Brain Stem
96.04	Intubate, Endotracheal	88.92	MRI of Chest & Myocardium
96.05	Other Intubation of Respiratory Tract	88.93	MRI of Spinal Canal, Cord
34.04	Chest Tube	88.94	MRI of Musculoskeletal
34.09	Needle Decompression	88.95	MRI of Pelvis, Prostate, Bladder
93.96	Oxygen Administration	88.97	MRI Other and Unspecified
	CPR		CT SCANS
99.60	Cardiopulmonary Resuscitation	87.03	CT Head
99.63	Closed Chest Massage	87.41	CT Thorax
93.93	Mouth to Mouth	87.71	CT Kidney
99.62	Cardioversion, Defibrillation	88.01	CT Abdomen
	WOUND CARE	88.38	CT Other Skeletal
86.28	Nonincisional Debridement Wound		X-RAY EXTREMITIES (Skeletal)
96.59	Wound Irrigation	88.21	Shoulder & Upper Arm
93.56	Application of Pressure Dressing	88.22	Elbow & Forearm
	SUTURE	88.23	Wrist & Hand
86.59	Suture Skin/SQ Tissue of Other Sites	88.24	Upper Limb Not Specified
18.4	Suture Ear, External	88.26	Pelvis & Hip
08.81	Suture Eyebrow or Eyelid	88.27	Thigh, Knee & Lower Leg
27.51	Suture Lip	88.28	Ankle & Foot
27.52	Suture Mouth	88.29	Lower Limbs Not Specified
21.81	Suture Nose	88.33	Other Skeletal
24.32	Suture Gingiva		X-RAYS
25.51	Suture Tongue	87.16	Facial
39.31	Suture Artery	87.17	Skull
39.32	Suture Vein	87.22	C-Spine
	TRANSFUSION	87.23	T-Spine
99.00	Perioperative autologous	87.24	L-Spine

	(cellsaver)			
99.04	Packed Cells		87.29	Other Spine
99.05	Platelets		87.43	Ribs, Sternum & Clavicle
99.06	Coagulation Factors		87.44	Routine Chest
99.07	Other Serum (plasma)		87.49	Other Chest (mediastinum, trachea)
99.08	Blood Expander		87.76	Retrograde Cystourethrogram
			87.79	KUB
			88.09	Soft Tissue of Abdominal Wall
			88.19	Abdomen
			87.12	Panogram

CODE	CLOSED REDUCTION of DISLOCATION		CODE	CLOSED REDUCTION of FRACTURE
79.70	Unspecified			WITHOUT INTERNAL FIXATION
79.71	Shoulder		79.00	Unspecified
79.72	Elbow		79.01	Humerus
79.73	Wrist		79.02	Radius & Ulna
79.74	Hand & Finger		79.03	Carpals & Metacarpals
79.75	Hip		79.04	Phalanges of Hand
79.76	Knee		79.05	Femur
79.77	Ankle		79.06	Tibia & Fibula
79.78	Foot & Toe		79.07	Tarsals & Metatarsals
79.79	Other Specified		79.08	Phalanges of Foot
			79.09	Other Specified Bone
CODE	MISC		CODE	MISC
37.0	Pericardiocentesis		96.70	Continuous Mechanical Ventilation Unspecified Time
38.91	Arterial Line Insertion		96.71	Continuous Mechanical Ventilation <96 Hours
87.77	Cystogram		96.72	Continuous Mechanical Ventilation >96 Hours
83.14	Fasciotomy		93.41	Spinal <i>Traction</i> (Halo or tongs)
99.38	Tetanus		02.94	Insertion(application) Tongs or Halo
89.52	EKG		02.2	Ventriculostomy
54.25	Peritoneal Lavage		01.26	Intracranial Pressure Monitoring
96.07	NG tube for Decompression			
57.94	Indwelling Bladder Catheter			
57.17	Percutaneous Suprapubic Catheter			

Appendix K

Occupational Code Definitions

OCCUPATIONAL CODE DEFINITIONS

BUS (Business and Financial Operations)

Administrative Services Managers
Advertising
Agricultural Managers
Chief Executives
Compensations and Benefits Managers
Computer and Information Systems Managers
Construction Managers
Education Administrators
Education Administrators, All Other
Education Administrators, Elementary and Secondary School
Education Administrators, Postsecondary
Education Administrators, Preschool and Child Care Center/Program
Engineering Managers
Farm, Ranch, and Other Agricultural Managers
Farmers and Ranchers
Financial Managers
Food Service Managers
Funeral Directors
Gaming Managers
General and Operations Managers
Human Resources Managers
Industrial Production Managers
Legislators
Lodging Managers
Managers, All Other
Marketing
Medical and Health Services Managers
Miscellaneous Managers
Natural Sciences Managers
Postmasters and Mail Superintendents
Promotions
Property, Real Estate, and Community Association Managers
Public Relations
Purchasing Managers
Sales Managers
Social and Community Service Managers
Training and Development Managers
Transportation, Storage, and Distribution Manager

ARC (Architecture and Engineering Occupations)

17-2000 Engineers
Architects
Cartographers
Drafters
Mapping Technicians
Surveyors

COM (Community and Social Service Occupations)

Clergy
Counselors
Directors, Religious Activities and Education
Health Educators
Miscellaneous Community and Social Service Specialists
Probation Officers and Correctional Treatment Specialists
Religious Workers
Social and Human Service Assistants

ED (Education, Training and Library Occupations)

Adult Literacy, Remedial Education, and GED Teachers and Instructors
Agricultural Sciences Teachers, Postsecondary
Anthropology and Archeology Teachers, Postsecondary
Archivists
Art, Drama, and Music Teachers, Postsecondary
Arts, Communications, and Humanities Teachers, Postsecondary
Atmospheric, Earth, Marine, and Space Sciences Teachers, Postsecondary
Audio-Visual Collections Specialists
Biological Science Teachers, Postsecondary
Business Teachers, Postsecondary
Chemistry Teachers, Postsecondary
Communications Teachers, Postsecondary
Computer Science Teachers, Postsecondary
Conservators
Criminal Justice and Law Enforcement Teachers, Postsecondary
Curators
Economics Teachers, Postsecondary
Education and Library Science Teachers, Postsecondary
Education Teachers, Postsecondary
Education, Training, and Library Workers, All Other
Elementary and Middle School Teachers
Engineering and Architecture Teachers, Postsecondary
English Language and Literature Teachers, Postsecondary
Environmental Science Teachers, Postsecondary
Farm and Home Management Advisors
Foreign Language and Literature Teachers, Postsecondary
Forestry and Conservation Science Teachers, Postsecondary
Geography Teachers, Postsecondary
Graduate Teaching Assistants
Health Specialties Teachers, Postsecondary
Health Teachers, Postsecondary
History Teachers, Postsecondary
Home Economics Teachers, Postsecondary
Instructional Coordinators
Law Teachers, Postsecondary
Law, Criminal Justice, and Social Work Teachers, Postsecondary
Librarians
Library Science Teachers, Postsecondary
Library Technicians
Life Sciences Teachers, Postsecondary
Math and Computer Teachers, Postsecondary
Mathematical Science Teachers, Postsecondary
Miscellaneous Postsecondary Teachers
Miscellaneous Teachers and Instructors
Museum Technicians
Nursing Instructors and Teachers, Postsecondary
Other Education, Training, and Library Occupations
Other Teachers and Instructors
Philosophy and Religion Teachers, Postsecondary
Physical Sciences Teachers, Postsecondary
Physics Teachers, Postsecondary
Political Science Teachers, Postsecondary
Postsecondary Teachers
Postsecondary Teachers, All Other
Preschool and Kindergarten Teachers
Primary, Secondary, and Special Education School Teachers
Psychology Teachers, Postsecondary

Recreation and Fitness Studies Teachers, Postsecondary
Secondary School Teachers
Self-Enrichment Education Teachers
Social Sciences Teachers, Postsecondary
Social Sciences Teachers, Postsecondary, All Other
Social Work Teachers, Postsecondary
Sociology Teachers, Postsecondary
Special Education Teachers, Middle School
Special Education Teachers, Preschool, Kindergarten, and Elementary School
Special Education Teachers, Secondary School
Teacher Assistants
Vocational Education Teachers, Middle School
Vocational Education Teachers, Postsecondary
Vocational Education Teachers, Secondary School

HEALTH (Health Care Practitioners and Technical Occupations)

Anesthesiologists
Athletic Trainers
Audiologists
Cardiovascular Technologists and Technicians
Chiropractors
Dental Hygienists
Dentists, All Other Specialists
Diagnostic Medical Sonographers
Diagnostic Related Technologists and Technicians
Dietetic Technicians
Dietitians and Nutritionists
Emergency Medical Technicians and Paramedics
Family and General Practitioners
Health Diagnosing and Treating Practitioner Support Technicians
Health Diagnosing and Treating Practitioners
Health Diagnosing and Treating Practitioners, All Other
Health Technologists and Technicians
Health Technologists and Technicians, All Other
Internists, General
Licensed Practical and Licensed Vocational Nurses
Medical and Clinical Laboratory Technologists
Medical Records and Health Information Technicians
Miscellaneous Health Practitioners and Technical Workers
Nuclear Medicine Technologists
Obstetricians and Gynecologists
Occupational Health and Safety Specialists and Technicians
Occupational Therapists
Opticians, Dispensing
Optometrists
Oral and Maxillofacial Surgeons
Orthodontists
Orthotists and Prosthetists
Pediatricians, General
Pharmacists
Pharmacy Technicians
Physical Therapists
Physician Assistants
Physicians and Surgeons
Podiatrists
Prosthodontists
Psychiatric Technicians
Psychiatrists
Radiation Therapists
Radiologic Technologists and Technicians

Recreational Therapists
Registered Nurses
Respiratory Therapists
Respiratory Therapy Technicians
Speech-Language Pathologists
Surgeons
Surgical Technologists
Therapists
Therapists, All Other
Veterinarians
Veterinary Technologists and Technicians

PRO (Protective Service Occupations)

Animal Control Workers
Bailiffs, Correctional Officers, and Jailers
Crossing Guards
Detectives and Criminal Investigators
Fire Inspectors and Investigators
First-Line Supervisors/Managers of Correctional Officers
First-Line Supervisors/Managers of Police and Detectives
First-Line Supervisors/Managers, Fire Fighting and Prevention Workers
First-Line Supervisors/Managers, Law Enforcement Workers
First-Line Supervisors/Managers, Protective Service Workers
First-Line Supervisors/Managers, Protective Service Workers, All Other
Fish and Game Wardens
Forest Fire Inspectors and Prevention Specialists
Gaming Surveillance Officers and Gaming Investigators
Law Enforcement Workers
Lifeguards, Ski Patrol, and Other Recreational Protective Service Workers
Miscellaneous Protective Service Workers
Parking Enforcement Workers
Police and Sheriff's Patrol Officers
Private Detectives and Investigators
Protective Service Workers, All Other
Security Guards
Transit and Railroad Police

MAIN (Building and Grounds Cleaning and Maintenance Occupations)

Building Cleaning and Pest Control Workers
Building Cleaning Workers, All Other
First-Line Supervisors/Managers of Housekeeping and Janitorial Workers
First-Line Supervisors/Managers of Landscaping, Lawn Service, and Groundskeeping Workers
Grounds Maintenance Workers
Grounds Maintenance Workers, All Other
Janitors and Cleaners
Landscaping and Groundskeeping Workers
Maids and Housekeeping Cleaners
Pest Control Workers
Pesticide Handlers, Sprayers, and Applicators, Vegetation
Supervisors, Building and Grounds Cleaning and Maintenance Workers
Tree Trimmers and Pruners

SALE (Sales and Related Occupations)

Advertising Sales Agents
Cashiers
Counter and Rental Clerks and Parts Salespersons
Door-To-Door Sales Workers, News and Street Vendors, and Related Workers
First-Line Supervisors/Managers of Non-Retail Sales Workers
First-Line Supervisors/Managers of Retail Sales Workers

First-Line Supervisors/Managers, Sales Workers
 Gaming Change Persons and Booth Cashiers
 Insurance Sales Agents
 Miscellaneous Sales and Related Workers
 Models, Demonstrators, and Product Promoters
 Other Sales and Related Workers
 Real Estate Brokers and Sales Agents
 Retail Sales Workers
 Retail Salespersons
 Sales and Related Workers, All Other
 Sales Engineers
 Sales Representatives, Services
 Sales Representatives, Services, All Other
 Sales Representatives, Wholesale and Manufacturing, Technical and Scientific Products
 Sales Representatives, Wholesale and Manufacturing, Except Technical and Scientific Products
 Securities, Commodities, and Financial Services Sales Agents
 Telemarketers
 Travel Agents

FARM (Farming, Fishing and Forestry Occupations)

Agricultural Equipment Operators
 Agricultural Inspectors
 Agricultural Workers
 Agricultural Workers, All Other
 Animal Breeders
 Fallers
 Farm Labor Contractors
 Farm workers and Laborers, Crop, Nursery, and Greenhouse
 Farm workers, Farm and Ranch Animals
 First-Line Supervisors/Managers of Farming, Fishing, and Forestry Workers
 Fishers and Related Fishing Workers
 Fishing and Hunting Workers
 Forest, Conservation, and Logging Workers
 Graders and Sorters, Agricultural Products
 Hunters and Trappers
 Log Graders and Scalers
 Logging Equipment Operators
 Logging Workers, All Other
 Miscellaneous Agricultural Workers

REP (Installation, Maintenance and Repair Occupations)

Aircraft Mechanics and Service Technicians
 Automotive Glass Installers and Repairers
 Automotive Service Technicians and Mechanics
 Avionics Technicians
 Bicycle Repairers
 Bus and Truck Mechanics and Diesel Engine Specialists
 Camera and Photographic Equipment Repairers
 Coin, Vending, and Amusement Machine Servicers and Repairers
 Commercial Divers
 Computer, Automated Teller, and Office Machine Repairers
 Control and Valve Installers and Repairers
 Control and Valve Installers and Repairers, Except Mechanical Door
 Electric Motor, Power Tool, and Related Repairers
 Electrical and Electronic Equipment Mechanics, Installers, and Repairers
 Electrical and Electronics Installers and Repairers, Transportation Equipment
 Electrical and Electronics Repairers, Commercial and Industrial Equipment
 Electrical and Electronics Repairers, Powerhouse, Substation, and Relay
 Electronic Equipment Installers and Repairers, Motor Vehicles

Electronic Home Entertainment Equipment Installers and Repairers
 Fabric Menders, Except Garment
 Farm Equipment Mechanics
 First-Line Supervisors/Managers of Mechanics, Installers, and Repairers
 Heating, Air Conditioning, and Refrigeration Mechanics and Installers
 Heavy Vehicle and Mobile Equipment Service Technicians and Mechanics
 Helpers--Installation, Maintenance, and Repair Workers
 Home Appliance Repairers
 Industrial Machinery Installation, Repair, and Maintenance Workers
 Industrial Machinery Mechanics
 Installation, Maintenance, and Repair Workers, All Other
 Line Installers and Repairers
 Locksmiths and Safe Repairers
 Maintenance and Repair Workers, General
 Maintenance Workers, Machinery
 Manufactured Building and Mobile Home Installers
 Mechanical Door Repairers
 Medical Equipment Repairers
 Millwrights
 Miscellaneous Electrical and Electronic Equipment Mechanics, Installers, and Repairers
 Miscellaneous Installation, Maintenance, and Repair Workers
 Miscellaneous Vehicle and Mobile Equipment Mechanics, Installers, and Repairers
 Mobile Heavy Equipment Mechanics, Except Engines
 Motorboat Mechanics
 Motorcycle Mechanics
 Musical Instrument Repairers and Tuners
 Other Installation, Maintenance, and Repair Occupations
 Outdoor Power Equipment and Other Small Engine Mechanics
 Precision Instrument and Equipment Repairers
 Precision Instrument and Equipment Repairers, All Other
 Radio and Telecommunications Equipment Installers and Repairers
 Radio Mechanics
 Rail Car Repairers
 Recreational Vehicle Service Technicians
 Refractory Materials Repairers, Except Brickmasons
 Riggers
 Security and Fire Alarm Systems Installers
 Signal and Track Switch Repairers
 Small Engine Mechanics
 Supervisors of Installation, Maintenance, and Repair Workers
 Telecommunications Equipment Installers and Repairers, Except Line Installers
 Tire Repairers and Changers
 Vehicle and Mobile Equipment Mechanics, Installers, and Repairers
 Watch Repairers

TRANS (Transportation and Material Moving Occupations)

Air Traffic Controllers and Airfield Operations Specialists
 Air Transportation Workers
 Aircraft Cargo Handling Supervisors
 Ambulance Drivers and Attendants, Except Emergency Medical Technicians
 Bridge and Lock Tenders
 Bus Drivers, School
 Bus Drivers, Transit and Intercity
 Captains, Mates, and Pilots of Water Vessels
 Cleaners of Vehicles and Equipment
 Commercial Pilots
 Conveyor Operators and Tenders
 Crane and Tower Operators
 Dredge, Excavating, and Loading Machine Operators
 Driver/Sales Workers and Truck Drivers

Excavating and Loading Machine and Dragline Operators
First-Line Supervisors/Managers of Helpers, Laborers, and Material Movers, Hand
First-Line Supervisors/Managers of Transportation and Material-Moving Machine and Vehicle Operators
Gas Compressor and Gas Pumping Station Operators
Hoist and Winch Operators
Industrial Truck and Tractor Operators
Laborers and Freight, Stock, and Material Movers, Hand
Laborers and Material Movers, Hand
Loading Machine Operators, Underground Mining
Locomotive Engineers and Operators
Locomotive Firers
Machine Feeders and Offbearers
Material Moving Workers
Material Moving Workers, All Other
Motor Vehicle Operators
Motor Vehicle Operators, All Other
Motorboat Operators
Other Transportation Workers
Packers and Packagers, Hand
Parking Lot Attendants
Pump Operators, Except Wellhead Pumps
Pumping Station Operators
Rail Transportation Workers
Rail Transportation Workers, All Other
Rail Yard Engineers, Dinkey Operators, and Hostlers
Railroad Brake, Signal, and Switch Operators
Railroad Conductors and Yardmasters
Refuse and Recyclable Material Collectors
Sailors and Marine Oilers
Service Station Attendants
Ship and Boat Captains and Operators
Ship Engineers
Shuttle Car Operators
Subway and Streetcar Operators
Supervisors, Transportation and Material Moving Workers
Tank Car, Truck, and Ship Loaders
Taxi Drivers and Chauffeurs
Traffic Technicians
Transportation Inspectors
Transportation Workers, All Other
Truck Drivers, Heavy and Tractor-Trailer
Truck Drivers, Light or Delivery Services
Water Transportation Workers
Wellhead Pumpers

MAN (Management Occupations)

Administrative Services Managers
Advertising, Marketing, Promotions, Public Relations, and Sales Managers
Agricultural Managers
Chief Executives
Compensation and Benefits Managers
Computer and Information Systems Managers
Construction Managers
Education Administrators
Education Administrators, All Other
Education Administrators, Elementary and Secondary School
Education Administrators, Postsecondary
Education Administrators, Preschool and Child Care Center/Program
Engineering Managers
Farm, Ranch, and Other Agricultural Managers

Farmers and Ranchers
Financial Managers
Food Service Managers
Funeral Directors
Gaming Managers
General and Operations Managers
Human Resources Managers
Human Resources Managers, All Other
Industrial Production Managers
Legislators
Lodging Managers
Managers, All Other
Medical and Health Services Managers
Miscellaneous Managers
Natural Sciences Managers
Operations Specialties Managers
Other Management Occupations
Postmasters and Mail Superintendents
Property, Real Estate, and Community Association Managers
Purchasing Managers
Social and Community Service Managers
Top Executives
Training and Development Managers
Transportation, Storage, and Distribution Managers

COMP (Computer and Mathematical Occupations)

Actuaries
Computer and Information Scientists, Research
Computer Programmers
Computer Software Engineers
Computer Software Engineers, Applications
Computer Software Engineers, Systems Software
Computer Specialists
Computer Specialists, All Other
Computer Support Specialists
Computer Systems Analysts
Database Administrators
Mathematical Science Occupations
Mathematical Science Occupations, All Other
Mathematical Technicians
Mathematicians
Network and Computer Systems Administrators
Network Systems and Data Communications Analysts
Operations Research Analysts
Statisticians

SCI (Life, Physical and Social Science Occupations)

Agricultural and Food Science Technicians
Agricultural and Food Scientists
Animal Scientists
Anthropologists and Archeologists
Astronomers and Physicists
Biochemists and Biophysicists
Biological Scientists
Biological Scientists, All Other
Biological Technicians
Chemical Technicians
Chemists and Materials Scientists
Clinical, Counseling, and School Psychologists

Conservation Scientists and Foresters
Economists
Environmental Science and Protection Technicians, Including Health
Epidemiologists
Food Scientists and Technologists
Forensic Science Technicians
Forest and Conservation Technicians
Geographers
Geological and Petroleum Technicians
Geoscientists
Historians
Hydrologists
Life Scientists
Life Scientists, All Other
Life, Physical, and Social Science Technicians
Life, Physical, and Social Science Technicians, All Other
Market and Survey Researchers
Medical Scientists
Microbiologists
Miscellaneous Life Scientists
Miscellaneous Life, Physical, and Social Science Technicians
Miscellaneous Physical Scientists
Miscellaneous Social Scientists and Related Workers
Nuclear Technicians
Physical Scientists
Physical Scientists, All Other
Political Scientists
Psychologists
Social Science Research Assistants
Social Scientists and Related Workers
Social Scientists and Related Workers, All Other
Sociologists
Soil and Plant Scientists
Urban and Regional Planners
Zoologists and Wildlife Biologists

LEGAL (Legal Occupations)

Administrative Law Judges, Adjudicators, and Hearing Officers
Arbitrators, Mediators, and Conciliators
Court Reporters
Judges, Magistrate Judges, and Magistrates
Judges, Magistrates, and Other Judicial Workers
Law Clerks
Lawyers, Judges, and Related Workers
Legal Support Workers
Legal Support Workers, All Other
Miscellaneous Legal Support Workers
Paralegals and Legal Assistants
Title Examiners, Abstractors, and Searchers

ENT (Art, Design, Entertainment, Sports and Media Occupations)

Actors, Producers, and Directors
Announcers
Art and Design Workers
Art Directors
Artists and Related Workers
Artists and Related Workers, All Other
Athletes and Sports Competitors
Athletes, Coaches, Umpires, and Related Workers

Audio and Video Equipment Technicians
Broadcast News Analysts
Broadcast Technicians
Camera Operators, Television, Video, and Motion Picture
Coaches and Scouts
Commercial and Industrial Designers
Craft Artists
Dancers and Choreographers
Designers
Designers, All Other
Entertainers and Performers, Sports and Related Workers
Entertainers and Performers, Sports and Related Workers, All Other
Fashion Designers
Film and Video Editors
Fine Artists, Including Painters, Sculptors, and Illustrators
Floral Designers
Graphic Designers
Interior Designers
Interpreters and Translators
Media and Communication Equipment Workers, All Other
Media and Communication Workers
Media and Communication Workers, All Other
Merchandise Displayers and Window Trimmers
Multi-Media Artists and Animators
Music Directors and Composers
Musicians, Singers, and Related Workers
News Analysts, Reporters and Correspondents
Photographers
Public Address System and Other Announcers
Public Relations Specialists
Radio and Television Announcers
Radio Operators
Reporters and Correspondents
Set and Exhibit Designers
Sound Engineering Technicians
Technical Writers
Television, Video, and Motion Picture Camera Operators and Editors
Umpires, Referees, and Other Sports Officials
Writers and Authors
Writers and Editors

HS (Health Care Support Occupations)

Dental Assistants
Healthcare Support Workers, All Other
Home Health Aides
Massage Therapists
Medical Assistants
Medical Equipment Preparers
Medical Transcriptionists
Miscellaneous Healthcare Support Occupations
Nursing Aides, Orderlies, and Attendants
Nursing, Psychiatric, and Home Health Aides
Nursing, Psychiatric, and Home Health Aides
Occupational and Physical Therapist Assistants and Aides
Occupational Therapist Assistants and Aides
Other Healthcare Support Occupations
Pharmacy Aides
Physical Therapist Assistants and Aides
Psychiatric Aides
Veterinary Assistants and Laboratory Animal Caretakers

FOOD (Food Preparation and Serving Related Occupations)

Bartenders
Chefs and Head Cooks
Combined Food Preparation and Serving Workers, Including Fast Food
Cooks
Cooks and Food Preparation Workers
Cooks, All Other
Cooks, Fast Food
Cooks, Institution and Cafeteria
Cooks, Private Household
Cooks, Restaurant
Cooks, Short Order
Counter Attendants, Cafeteria, Food Concession, and Coffee Shop
Dining Room and Cafeteria Attendants and Bartender Helpers
Dishwashers
Fast Food and Counter Workers
First-Line Supervisors/Managers, Food Preparation and Serving Workers
Food and Beverage Serving Workers
Food Preparation and Serving Related Workers, All Other
Food Preparation Workers
Food Servers, Nonrestaurant
Hosts and Hostesses, Restaurant, Lounge, and Coffee Shop
Other Food Preparation and Serving Related Workers
Supervisors, Food Preparation and Serving Workers
Waiters and Waitresses

PER (Personal Care and Service Occupations)

Amusement and Recreation Attendants
Animal Care and Service Workers
Animal Trainers
Baggage Porters, Bellhops, and Concierges
Barbers and Cosmetologists
Child Care Workers
Costume Attendants
Embalmers
Entertainment Attendants and Related Workers
Entertainment Attendants and Related Workers, All Other
First-Line Supervisors/Managers of Gaming Workers
First-Line Supervisors/Managers of Personal Service Workers
Fitness Trainers and Aerobics Instructors
Flight Attendants
Funeral Attendants
Funeral Service Workers
Gaming and Sports Book Writers and Runners
Gaming Dealers
Gaming Service Workers, All Other
Gaming Services Workers
Gaming Supervisors
Hairdressers, Hairstylists, and Cosmetologists
Locker Room, Coatroom, and Dressing Room Attendants
Makeup Artists, Theatrical and Performance
Manicurists and Pedicurists
Miscellaneous Entertainment Attendants and Related Workers
Miscellaneous Personal Appearance Workers
Motion Picture Projectionists
Nonfarm Animal Caretakers
Other Personal Care and Service Workers
Personal and Home Care Aides

Personal Appearance Workers
Personal Care and Service Workers, All Other
Recreation and Fitness Workers
Residential Advisors
Shampooers
Skin Care Specialists
Slot Key Persons
Supervisors, Personal Care and Service Workers
Tour and Travel Guides
Tour Guides and Escorts
Transportation Attendants
Transportation Attendants, Except Flight Attendants and Baggage Porters
Transportation, Tourism, and Lodging Attendants
Ushers, Lobby Attendants, and Ticket Takers

OFFICE (Office and Administrative Support Occupations)

Bill and Account Collectors
Billing and Posting Clerks and Machine Operators
Bookkeeping, Accounting, and Auditing Clerks
Brokerage Clerks
Cargo and Freight Agents
Communications Equipment Operators
Communications Equipment Operators, All Other
Computer Operators
Correspondence Clerks
Couriers and Messengers
Court, Municipal, and License Clerks
Credit Authorizers, Checkers, and Clerks
Customer Service Representatives
Data Entry and Information Processing Workers
Data Entry Keyers
Desktop Publishers
Dispatchers
Dispatchers, Except Police, Fire, and Ambulance
Eligibility Interviewers, Government Programs
Executive Secretaries and Administrative Assistants
File Clerks
Financial Clerks
First-Line Supervisors/Managers of Office and Administrative Support Workers
Gaming Cage Workers
Hotel, Motel, and Resort Desk Clerks
Human Resources Assistants, Except Payroll and Timekeeping
Information and Record Clerks
Information and Record Clerks, All Other
Insurance Claims and Policy Processing Clerks
Interviewers, Except Eligibility and Loan
Legal Secretaries
Library Assistants, Clerical
Loan Interviewers and Clerks
Mail Clerks and Mail Machine Operators, Except Postal Service
Material Recording, Scheduling, Dispatching, and Distributing Workers
Medical Secretaries
Meter Readers, Utilities
New Accounts Clerks
Office and Administrative Support Workers, All Other
Office Clerks, General
Office Machine Operators, Except Computer
Order Clerks
Other Office and Administrative Support Workers
Payroll and Timekeeping Clerks

Police, Fire, and Ambulance Dispatchers
Postal Service Clerks
Postal Service Mail Carriers
Postal Service Mail Sorters, Processors, and Processing Machine Operators
Postal Service Workers
Procurement Clerks
Production, Planning, and Expediting Clerks
Proofreaders and Copy Markers
Receptionists and Information Clerks
Reservation and Transportation Ticket Agents and Travel Clerks
Secretaries and Administrative Assistants
Secretaries, Except Legal, Medical, and Executive
Shipping, Receiving, and Traffic Clerks
Statistical Assistants
Stock Clerks and Order Fillers
Supervisors, Office and Administrative Support Workers
Switchboard Operators, Including Answering Service
Telephone Operators
Tellers
Weighers, Measurers, Checkers, and Samplers, Recordkeeping
Word Processors and Typists

CONS (Construction and Extrication Occupations)

Boilermakers
Brickmasons, Blockmasons, and Stonemasons
Carpenters
Carpet, Floor, and Tile Installers and Finishers
Cement Masons, Concrete Finishers, and Terrazzo Workers
Construction and Building Inspectors
Construction and Related Workers, All Other
Construction Equipment Operators
Construction Laborers
Construction Trades Workers
Continuous Mining Machine Operators
Derrick, Rotary Drill, and Service Unit Operators, Oil, Gas, and Mining
Drywall Installers, Ceiling Tile Installers, and Tapers
Earth Drillers, Except Oil and Gas
Electricians
Elevator Installers and Repairers
Explosives Workers, Ordnance Handling Experts, and Blasters
Extraction Workers
Extraction Workers, All Other
Fence Erectors
First-Line Supervisors/Managers of Construction Trades and Extraction Workers
Floor Layers, Except Carpet, Wood, and Hard Tiles
Floor Sanders and Finishers
Glaziers
Hazardous Materials Removal Workers
Helpers, Construction Trades
Helpers, Construction Trades, All Other
Helpers--Brickmasons, Blockmasons, Stonemasons, and Tile and Marble Setters
Helpers--Carpenters
Helpers--Electricians
Helpers--Extraction Workers
Helpers--Painters, Paperhangers, Plasterers, and Stucco Masons
Helpers--Pipelayers, Plumbers, Pipefitters, and Steamfitters
Helpers--Roofers
Highway Maintenance Workers
Insulation Workers, Floor, Ceiling, and Wall
Insulation Workers, Mechanical

Mine Cutting and Channeling Machine Operators
 Mining Machine Operators
 Mining Machine Operators, All Other
 Operating Engineers and Other Construction Equipment Operators
 Other Construction and Related Workers
 Painters and Paperhangers
 Painters, Construction and Maintenance
 Paving, Surfacing, and Tamping Equipment Operators
 Pile-Driver Operators
 Pipelayers, Plumbers, Pipefitters, and Steamfitters
 Plasterers and Stucco Masons
 Rail-Track Laying and Maintenance Equipment Operators
 Reinforcing Iron and Rebar Workers
 Rock Splitters, Quarry
 Roof Bolters, Mining
 Roofers
 Roustabouts, Oil and Gas
 Segmental Pavers
 Septic Tank Servicers and Sewer Pipe Cleaners
 Service Unit Operators, Oil, Gas, and Mining
 Sheet Metal Workers
 Structural Iron and Steel Workers
 Supervisors, Construction and Extraction Workers
 Tile and Marble Setters

PROD (Production Occupations)

Aircraft Structure, Surfaces, Rigging, and Systems Assemblers
 Assemblers and Fabricators
 Assemblers and Fabricators, All Other
 Bakers
 Bookbinders and Bindery Workers
 Butchers and Meat Cutters
 Butchers and Other Meat, Poultry, and Fish Processing Workers
 Cabinetmakers and Bench Carpenters
 Cementing and Gluing Machine Operators and Tenders
 Chemical Plant and System Operators
 Chemical Processing Machine Setters, Operators, and Tenders
 Cleaning, Washing, and Metal Pickling Equipment Operators and Tenders
 Coating, Painting, and Spraying Machine Setters, Operators, and Tenders
 Coil Winders, Tapers, and Finishers
 Computer Control Programmers and Operators
 Computer-Controlled Machine Tool Operators, Metal and Plastic
 Cooling and Freezing Equipment Operators and Tenders
 Crushing, Grinding, and Polishing Machine Setters, Operators, and Tenders
 Crushing, Grinding, Polishing, Mixing, and Blending Workers
 Cutters and Trimmers, Hand
 Cutting and Slicing Machine Setters, Operators, and Tenders
 Cutting Workers
 Cutting, Punching, and Press Machine Setters, Operators, and Tenders, Metal and Plastic
 Dental Laboratory Technicians
 Drilling and Boring Machine Tool Setters, Operators, and Tenders, Metal and Plastic
 Electrical and Electronic Equipment Assemblers
 Electrical, Electronics, and Electromechanical Assemblers
 Electromechanical Equipment Assemblers
 Engine and Other Machine Assemblers
 Etchers and Engravers
 Extruding and Drawing Machine Setters, Operators, and Tenders, Metal and Plastic
 Extruding and Forming Machine Setters, Operators, and Tenders, Synthetic and Glass Fibers
 Extruding, Forming, Pressing, and Compacting Machine Setters, Operators, and Tenders
 Fabric and Apparel Patternmakers

Fiberglass Laminators and Fabricators
First-Line Supervisors/Managers of Production and Operating Workers
Food and Tobacco Roasting, Baking, and Drying Machine Operators and Tenders
Food Batchmakers
Food Cooking Machine Operators and Tenders
Food Processing Workers
Forming Machine Setters, Operators, and Tenders, Metal and Plastic
Foundry Mold and Coremakers
Furnace, Kiln, Oven, Drier, and Kettle Operators and Tenders
Furniture Finishers
Gas Plant Operators
Grinding and Polishing Workers, Hand
Grinding, Lapping, Polishing, and Buffing Machine Tool Setters, Operators, and Tenders, Metal and Plastic
Heat Treating Equipment Setters, Operators, and Tenders, Metal and Plastic
Helpers--Production Workers
Inspectors, Testers, Sorters, Samplers, and Weighers
Jewelers and Precious Stone and Metal Workers
Job Printers
Lathe and Turning Machine Tool Setters, Operators, and Tenders, Metal and Plastic
Laundry and Dry-Cleaning Workers
Lay-Out Workers, Metal and Plastic
Machine Tool Cutting Setters, Operators, and Tenders, Metal and Plastic
Machinists
Meat, Poultry, and Fish Cutters and Trimmers
Medical Appliance Technicians
Medical, Dental, and Ophthalmic Laboratory Technicians
Metal Furnace and Kiln Operators and Tenders
Metal Workers and Plastic Workers
Metal Workers and Plastic Workers, All Other
Metal-Refining Furnace Operators and Tenders
Milling and Plating Machine Setters, Operators, and Tenders, Metal and Plastic
Miscellaneous Assemblers and Fabricators
Miscellaneous Food Processing Workers
Miscellaneous Plant and System Operators
Miscellaneous Production Workers
Miscellaneous Woodworkers
Mixing and Blending Machine Setters, Operators, and Tenders
Model Makers and Patternmakers, Metal and Plastic
Model Makers and Patternmakers, Wood
Molders and Molding Machine Setters, Operators, and Tenders, Metal and Plastic
Molders, Shapers, and Casters, Except Metal and Plastic
Molding, Coremaking, and Casting Machine Setters, Operators, and Tenders, Metal and Plastic
Multiple Machine Tool Setters, Operators, and Tenders, Metal and Plastic
Nuclear Power Reactor Operators
Numerical Tool and Process Control Programmers
Ophthalmic Laboratory Technicians
Other Production Occupations
Packaging and Filling Machine Operators and Tenders
Painters, Transportation Equipment
Painting Workers
Painting, Coating, and Decorating Workers
Paper Goods Machine Setters, Operators, and Tenders
Photographic Process Workers and Processing Machine Operators
Plant and System Operators
Plating and Coating Machine Setters, Operators, and Tenders, Metal and Plastic
Pourers and Casters, Metal
Power Plant Operators, Distributors, and Dispatchers
Prepress Technicians and Workers
Pressers, Textile, Garment, and Related Materials
Printers

Printing Machine Operators
 Printing Workers
 Production Workers, All Other
 Rolling Machine Setters, Operators, and Tenders, Metal and Plastic
 Sawing Machine Setters, Operators, and Tenders, Wood
 Semiconductor Processors
 Separating, Filtering, Clarifying, Precipitating, and Still Machine Setters, Operators, and Tenders
 Sewers, Hand
 Sewing Machine Operators
 Shoe and Leather Workers and Repairers
 Shoe Machine Operators and Tenders
 Slaughterers and Meat Packers
 Stationary Engineers and Boiler Operators
 Structural Metal Fabricators and Fitters
 Tailors, Dressmakers, and Sewers
 Team Assemblers
 Textile Bleaching and Dyeing Machine Operators and Tenders
 Textile Cutting Machine Setters, Operators, and Tenders
 Textile Knitting and Weaving Machine Setters, Operators, and Tenders
 Textile Machine Setters, Operators, and Tenders
 Textile Winding, Twisting, and Drawing Out Machine Setters, Operators, and Tenders
 Textile, Apparel, and Furnishings Workers
 Textile, Apparel, and Furnishings Workers, All Other
 Timing Device Assemblers, Adjusters, and Calibrators
 Tire Builders
 Tool and Die Makers
 Tool Grinders, Filers, and Sharpeners
 Upholsterers
 Water and Liquid Waste Treatment Plant and System Operators
 Welders, Cutters, Solderers, and Brazers
 Welding, Soldering, and Brazing Machine Setters, Operators, and Tenders
 Woodworkers
 Woodworkers, All Other
 Woodworking Machine Setters, Operators, and Tenders
 Woodworking Machine Setters, Operators, and Tenders, Except Sawing

MILITARY (Military-Specific Occupations)

Air Crew Members
 Air Crew Officers
 Aircraft Launch and Recovery Officers
 Aircraft Launch and Recovery Specialists
 Armored Assault Vehicle Crew Members
 Armored Assault Vehicle Officers
 Artillery and Missile Crew Members
 Artillery and Missile Officers
 Command and Control Center Officers
 Command and Control Center Specialists
 First-Line Enlisted Military Supervisor/Managers
 First-Line Supervisors/Managers of Air Crew Members
 First-Line Supervisors/Managers of All Other Tactical Operations Specialists
 First-Line Supervisors/Managers of Weapons Specialists/Crew Members
 Infantry
 Infantry Officers
 Military Enlisted Tactical Operations and Air/Weapons Specialists and Crew Members
 Military Enlisted Tactical Operations and Air/Weapons Specialists and Crew Members, All Other
 Military Officer Special and Tactical Operations Leaders/Managers
 Military Officer Special and Tactical Operations Leaders/Managers, All Other
 Radar and Sonar Technicians
 Special Forces
 Special Forces Officers

Appendix L

Comorbid/Complication Definitions

CO-MORBID CONDITIONS

Alcoholism: To be determined based upon the brief screening tool used at your institution. Documented past or present abuse/excessive usage of ETOH.

Ascites: The presence of fluid accumulation (other than blood) in the peritoneal cavity noted on physical examination, abdominal ultrasound, or abdominal CT/MRI.

Bleeding disorder: Any condition that places the patient at risk for excessive bleeding due to a deficiency of blood clotting elements (e.g., vitamin K deficiency, hemophilia, thrombocytopenia, chronic anticoagulation therapy with Coumadin, Plavix, or similar medications). Do not include the patient on chronic aspirin therapy.

Chemotherapy for cancer within 30 days: A patient who had any chemotherapy treatment for cancer in the 30 days prior to admission. Chemotherapy may include, but is not restricted to, oral and parenteral treatment with chemotherapeutic agents for malignancies such as colon, breast, lung, head and neck, and gastrointestinal solid tumors as well as lymphatic and hematopoietic malignancies such as lymphoma, leukemia, and multiple myeloma.

Congenital Anomalies: Defined as documentation of a cardiac, pulmonary, body wall, CNS/spinal, GI, renal, orthopedic, or metabolic congenital anomaly.

Congestive heart failure: Defined as the inability of the heart to pump a sufficient quantity of blood to meet the metabolic needs of the body or can do so only at an increased ventricular filling pressure. To be included, this condition must be noted in the medical record as CHF, congestive heart failure, or pulmonary edema with onset or increasing symptoms within 30 days prior to injury. Common manifestations are:

1. Abnormal limitation in exercise tolerance due to dyspnea or fatigue
2. Orthopnea (dyspnea on lying supine)
3. Paroxysmal nocturnal dyspnea (awakening from sleep with dyspnea)
4. Increased jugular venous pressure
5. Pulmonary rales on physical examination
6. Cardiomegaly
7. Pulmonary vascular engorgement

Current smoker: A patient who has smoked cigarettes in the year prior to admission. Do not include patients who smoke cigars or pipes or use chewing tobacco.

Currently requiring or on dialysis: Acute or chronic renal failure prior to injury that was requiring periodic peritoneal dialysis, hemodialysis, hemofiltration, or hemodiafiltration.

CVA/residual neurological deficit: A history prior to injury of a cerebrovascular accident (embolic, thrombotic, or hemorrhagic) with persistent residual motor, sensory, or cognitive dysfunction. (e.g., hemiplegia, hemiparesis, aphasia, sensory deficit, impaired memory).

Diabetes mellitus: Diabetes mellitus prior to injury that required exogenous parenteral insulin or an oral hypoglycemic agent. Do not include a patient if diabetes is controlled by diet alone.

Disseminated cancer: Patients who have cancer that:

1. Has spread to one site or more sites in addition to the primary site AND
 2. In whom the presence of multiple metastases indicates the cancer is widespread, fulminant, or near terminal.
- Other terms describing disseminated cancer include “diffuse,” “widely metastatic,” “widespread,” or

“carcinomatosis.” Common sites of metastases include major organs (e.g., brain, lung, liver, meninges, abdomen, peritoneum, pleura, and bone).

Do Not Resuscitate (DNR) status: The patient had a Do-Not-Resuscitate (DNR) document or similar advance directive recorded prior to injury.

Esophageal varices: Esophageal varices are engorged collateral veins in the esophagus which bypass a scarred liver to carry portal blood to the superior vena cava. A sustained increase in portal pressure results in esophageal varices which are most frequently demonstrated by direct visualization at esophagoscopy.

Functionally dependent health status: Pre-injury functional status may be represented by the ability of the patient to complete activities of daily living (ADL) including: bathing, feeding, dressing, toileting, and walking. This item is marked YES if the patient, prior to injury, was partially dependent or completely dependent upon equipment, devices or another person to complete some or all activities of daily living. Formal definitions of dependency are listed below:

1. Partially dependent: The patient requires the use of equipment or devices coupled with assistance from another person for some activities of daily living. Any patient coming from a nursing home setting who is not totally dependent would fall into this category, as would any patient who requires kidney dialysis or home ventilator support that requires chronic oxygen therapy yet maintains some independent functions.
2. Totally dependent: The patient cannot perform any activities of daily living for himself/herself. This would include a patient who is totally dependent upon nursing care, or a dependent nursing home patient. All patients with psychiatric illnesses should be evaluated for their ability to function with or without assistance with ADLs just as the non-psychiatric patient.

History of angina within past 1 month: Pain or discomfort between the diaphragm and the mandible resulting from myocardial ischemia. Typically angina is a dull, diffuse (fist sized or larger) substernal chest discomfort precipitated by exertion or emotion and relieved by rest or nitroglycerine. Radiation often occurs to the arms and shoulders and occasionally to the neck, jaw (mandible, not maxilla), or interscapular region. For patients on anti-anginal medications, enter yes only if the patient has had angina within one month prior to admission.

History of Myocardial Infarction within past 6 months: The history of a non-Q wave, or a Q wave infarction in the six months prior to injury as diagnosed in the patient's medical record.

History of revasc/amp for PVD (History of revascularization/amputation for peripheral vascular disease): Any type of angioplasty or revascularization procedure for atherosclerotic PVD (e.g., aortafemoral, femoral-femoral, femoral-popliteal) or a patient who has had any type of amputation procedure for PVD (e.g., toe amputations, transmetatarsal amputations, below the knee or above the knee amputations). Patients who have had amputation for trauma or resection of abdominal aortic aneurysms would not be included.

Hypertension requiring medication: History of a persistent elevation of systolic blood pressure >140 mm Hg and a diastolic blood pressure >90 mm Hg requiring an antihypertensive treatment (e.g., diuretics, beta blockers, ACE inhibitors, calcium channel blockers).

Impaired sensorium: Patients should be noted to having an impaired sensorium if they had mental status changes, and/or delirium in the context of a current illness prior to injury. Patients with chronic or longstanding mental status changes secondary to chronic mental illness (e.g., schizophrenia) or chronic dementing illnesses (e.g., multi-infarct dementia, senile dementia of the Alzheimer's type) should also be included. For pediatric populations, patients with documented behavior disturbances, attention disorders, delayed learning or delayed development should be included.

Prematurity: Defined as documentation of premature birth, a history of bronchopulmonary dysplasia, ventilator support for greater than 7 days after birth, or the diagnosis of cerebral palsy. Premature birth is defined as infants delivered before 37 weeks from the first day of the last menstrual period.

Obesity: Defined as a Body Mass Index of 40 or greater.

Respiratory Disease: Defined as severe chronic lung disease, chronic asthma; cystic fibrosis; or COPD (such as emphysema and/or chronic bronchitis) resulting in any one or more of the following:

1. Functional disability from COPD (e.g., dyspnea, inability to perform ADLs)
2. Hospitalization in the past for treatment of COPD
3. Requires chronic bronchodilator therapy with oral or inhaled agents
4. An FEV1 of <75% of predicted on pulmonary function testing

Do not include patients whose only pulmonary disease is *acute* asthma. Do not include patients with diffuse interstitial fibrosis or sarcoidosis.

Steroid use: Patients that required the regular administration of oral or parenteral corticosteroid medications (e.g., Prednisone, Decadron) in the 30 days prior to injury for a chronic medical condition (e.g., COPD, asthma, rheumatologic disease, rheumatoid arthritis, inflammatory bowel disease). Do not include topical corticosteroids applied to the skin or corticosteroids administered by inhalation or rectally.

HOSPITAL COMPLICATIONS

Abdominal compartment syndrome: Defined as the sudden increase in the intra-abdominal pressure resulting in alteration in the respiratory mechanism, hemodynamic parameters, and renal perfusion. Typically patients with this syndrome are critically ill and require ventilator support and/or reoperation.

Abdominal fascia left open: No primary surgical closure of the fascia or intra-abdominal packs left at conclusion of primary laparotomy (damage control).

Acute renal failure: A patient who did not require dialysis prior to injury, who has worsening renal dysfunction after injury requiring hemodialysis, ultrafiltration, or peritoneal dialysis. If the patient refuses treatment (e.g., dialysis), the condition is still considered present.

ARDS: Adult (Acute) Respiratory Distress Syndrome: ARDS occurs in conjunction with catastrophic medical conditions, such as pneumonia, shock, sepsis (or severe infection throughout the body, sometimes also referred to as systemic infection, and may include or also be called a blood or blood-borne infection), and trauma. It is a form of sudden and often severe lung failure characterized by $\text{PaO}_2/\text{FiO}_2 \leq 200$, decreased compliance, and diffuse bilateral pulmonary infiltrates without associated clinical evidence of CHF. The process must persist beyond 36 hours and require mechanical ventilation.

Base deficit: Defined as a value greater than 4 at any time during admission. This number is reported as a component of arterial or venous blood gases. The number may be reported by the lab as Base Deficit, or as Base Excess with a negative value.

Bleeding: Any transfusion (including autologous) of five or more units of packed red blood cells or whole blood given from the time the patient is injured up to and including 72 hours later. The blood may be given for any reason.

Cardiac arrest with CPR: The absence of a cardiac rhythm or presence of chaotic cardiac rhythm that results in loss of consciousness requiring the initiation of any component of basic and/or advanced cardiac life support.

Coagulopathy: Defined as twice the upper limit of the normal range for PT or PTT in a patient without a pre-injury bleeding disorder of this magnitude.

Coma: Defined as significantly impaired level of consciousness (exclude transient disorientation or psychosis) for greater than 24 hours.

Decubitus ulcer: Defined as a “pressure sore” resulting from pressure exerted on the skin, soft tissue, muscle, or bone by the weight of an individual against a surface beneath. Individuals unable to avoid long periods of uninterrupted pressure over bony prominences are at increased risk for the development of necrosis and ulceration.

Deep surgical site infection: Defined as an infection that occurs within 30 days after an operation and the infection appears to be related to the operation. The infection should involve deep soft tissues (e.g., fascial and muscle layers) at the site of incision and at least one of the following:

1. Purulent drainage from the deep incision but not from the organ/space component of the surgical site.
2. A deep incision spontaneously dehisces or is deliberately opened by a surgeon when the patient has at least one of the following signs or symptoms: fever ($> 38^{\circ}\text{C}$), localized pain, or tenderness, unless site is culture-negative.
3. An abscess or other evidence of infection involving the deep incision is found on direct examination, during reoperation, or by histopathologic or radiologic examination.
4. Diagnosis of a deep incision infection by a surgeon or attending physician.

Note:

Report infections that involve both superficial and deep incision sites as deep surgical site infection.

Delayed Diagnosis: Diagnosis made after 24 hours and/or tertiary assessment; prior to discharge or transfer.

Drug or alcohol withdrawal syndrome: Defined as a set of **symptoms that may occur when a person who has been drinking too much alcohol or habitually using certain drugs suddenly stops. Symptoms may include:** activation syndrome (e.g., tremulousness, agitation, rapid heart beat and high blood pressure), seizures, hallucinations or delirium tremens.

Deep Vein Thrombosis (DVT)/thrombophlebitis: The formation, development, or existence of a blood clot or thrombus within the vascular system, which may be coupled with inflammation. This diagnosis may be confirmed by a venogram, ultrasound, or CT. The patient must be treated with heparin and/or coumadin or warfarin, and/or placement of a vena cava filter or clipping of the vena cava.

Extremity compartment syndrome: Defined as a condition in which there is swelling and an increase in pressure within a limited space (a fascial compartment) that presses on and compromises blood vessels, nerves, and/or tendons that run through that compartment. Compartment syndromes usually involve the leg but can also occur in the forearm, arm, thigh, and shoulder.

Graft/prosthesis/flap failure: Mechanical failure of an extracardiac vascular graft or prosthesis including myocutaneous flaps and skin grafts requiring return to the operating room or a balloon angioplasty.

Intracranial pressure elevation: Defined as intracranial pressure greater than 25 Torr for greater than 30 minutes.

Missed Diagnosis: Diagnosis made after discharge or transfer.

Myocardial infarction: A new acute myocardial infarction occurring within 30 days of injury manifested by new Q-waves on ECG.

Organ/space surgical site infection: Defined as an infection that occurs within 30 days after an operation and infection involves any part of the anatomy (eg, organs or spaces) other than the incision, which was opened or manipulated during a procedure; and at least one of the following, including:

1. Purulent drainage from a drain that is placed through a stab wound or puncture into the organ/space;
2. Organisms isolated from an aseptically obtained culture of fluid or tissue in the organ/space;
3. An abscess or other evidence of infection involving the organ/space that is found on direct examination, during reoperation, or by histopathologic or radiologic examination; or
4. Diagnosis of an organ/space SSI by a surgeon or attending physician.

Pneumonia: Patients with evidence of pneumonia that develops during the hospitalization. Patients with pneumonia must meet at least one of the following two criteria:

Criterion 1. Rales or dullness to percussion on physical examination of chest AND any of the following:

- a. New onset of purulent sputum or change in character of sputum
- b. Organism isolated from blood culture
- c. Isolation of pathogen from specimen obtained by transtracheal aspirate, bronchial brushing, or biopsy

Criterion 2. Chest radiographic examination shows new or progressive infiltrate, consolidation, cavitation, or pleural effusion AND any of the following:

- a. New onset of purulent sputum or change in character of sputum
- b. Organism isolated from the blood
- c. Isolation of pathogen from specimen obtained by transtracheal aspirate, bronchial brushing, or biopsy
- d. Isolation of virus or detection of viral antigen in respiratory secretions
- e. Diagnostic single antibody titer (IgM) or fourfold increase in paired serum samples (IgG) for pathogen
- f. Histopathologic evidence of pneumonia

Pulmonary embolism: Defined as a lodging of a blood clot in a pulmonary artery with subsequent obstruction of blood supply to the lung parenchyma. The blood clots usually originate from the deep leg veins or the pelvic venous system. Consider the condition present if the patient has a V-Q scan interpreted as high probability of pulmonary embolism or a positive pulmonary arteriogram or positive CT angiogram.

Stroke/CVA: Following injury, patient develops an embolic, thrombotic, or hemorrhagic vascular accident or stroke with motor, sensory, or cognitive dysfunction (e.g., hemiplegia, hemiparesis, aphasia, sensory deficit, and impaired memory) that persists for 24 or more hours.

Superficial surgical site infection: Defined as an infection that occurs within 30 days after an operation and infection involves only skin or subcutaneous tissue of the incision and at least one of the following:

1. Purulent drainage, with or without laboratory confirmation, from the superficial incision.
2. Organisms isolated from an aseptically obtained culture of fluid or tissue from the superficial incision.
3. At least one of the following signs or symptoms of infection: pain or tenderness, localized swelling, redness, or heat and superficial incision is deliberately opened by the surgeon, unless incision is culture-negative.
4. Diagnosis of superficial incisional surgical site infection by the surgeon or attending physician.

Do not report the following conditions as superficial surgical site infection:

1. Stitch abscess (minimal inflammation and discharge confined to the points of suture penetration).
2. Infected burn wound.
3. Incisional SSI that extends into the fascial and muscle layers (see deep surgical site infection).

Systemic sepsis: Defined as definitive evidence of infection, plus evidence of a systemic response to infection. This systemic response is manifested by TWO or more of the following conditions:

1. Temp >38 degrees C or <36 degrees C
2. Sepsis with hypotension despite adequate fluid resuscitation combined with perfusion abnormalities that may include, but are not limited to, lactic acidosis, oliguria, or an acute alteration in mental status. Patients who are on inotropic or vasopressor agents may not be hypotensive at the time that perfusion abnormalities are measured.
3. HR >90 bpm
4. RR >20 breaths/min or PaCO₂ <32 mmHg (<4.3 kPa)
5. WBC >12,000 cell/mm³, <4000 cells/mm³, or >10% immature (band) forms

Unplanned intubation: Patient requires placement of an endotracheal tube and mechanical or assisted ventilation because of the onset of respiratory or cardiac failure manifested by severe respiratory distress, hypoxia, hypercarbia, or respiratory acidosis. In patients who were intubated in the field or Emergency Department, or those intubated for surgery, unplanned intubation occurs if they require reintubation after being extubated.

Wound disruption: Separation of the layers of a surgical wound, which may be partial or complete, with disruption of the fascia.

Operative and/or essential procedures is defined as procedures performed in the Operating Room, Emergency Department, or Intensive Care Unit that were essential to the diagnoses, stabilization, or treatment of the patient's specific injuries. Repeated diagnostic procedures (e.g., repeated CT scan) should not be recorded (record only the first procedure).

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